Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Antesia, NM 88210 State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

ADR 18'89

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		,				MK TO	<b>-</b>		
1.	REQUEST FOR			<del>-</del>			U.		
TO TRANSPORT OIL AND NATURAL GA					AS	S O. C. P. Well API NORTESTA. DEFICE			
Operator					Well	API NORTESIA	•		
Hondo Oil & Gas Comp	oany 🗸								
Address									
P. O. Box 2208, Rosy	well, NM 88202			(5)				<del></del>	
Reason(s) for Filing (Check proper box)	~ . m		Oth	er (Please expl	ain)				
New Well	Change in Tr								
Recompletion $\square$		ry Gas 🗀							
Change in Operator	Casinghead Gas C	ondensate							
f change of operator give name and address of previous operator									
II. DESCRIPTION OF WELL	AND LEASE								
Lease Name					of Lease				
J. L. Keel "B"	45	Grayburg	Jackson	5R-12-6-5	A KSINK	Federalxx Rex	Lc-0	29435 <b>-</b> B	
Location				<del></del>				, · · ·	
Unit Letter G	:1930F	eet From The N	orth Lin	e and 183	10 F	et From The _	East	Line	
	-								
Section 5 Townsh	ip 17S R	ange 31E	, N	MPM,	Eddy			County	
III DECICNATION OF TO A	Venonten of ou	A RITS RIA TOTAL	IDAT CAC						
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	or Condensal			e address to w	hich approved	copy of this for	m is to he s	eni)	
•	Address (Give address to which approved copy of this form is to be sent)								
Texas-New Mexico Pipeline  Name of Authorized Transporter of Casinghead Gas X or Dry Gas				P. O. Box 2528, Hobbs, NM 88240  Address (Give address to which approved copy of this form is to be sent)					
Conoco		. 21, 045	i			ind, TX		,	
If well produces oil or liquids,	Unit Sec. T	wp. Rge.	Is gas actual		When		12102		
give location of tanks.		.7S   31E	Yes	•	í	 ′5/89			
If this production is commingled with that				ber:	<u> </u>	<u> </u>			
IV. COMPLETION DATA				<del></del>					
	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	LA	1	X	1	1				
Date Spudded	Date Compl. Ready to Pr	rod.	Total Depth			P.B.T.D.			
2/13/89	3/30/89		3883 ' Top Oil/Gas Pay			3828'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		-			Tubing Depth			
3891' GR	Grayburg San Andres		3136'			3731 '			
Perforations	77.1 2616 2720					Depth Casing			
3136-3308', 3351-35			CIE) CEVITE	NO PEGOD		1 3	883'		
11015 0175	<del></del>	ASING AND	CEMENTI			т	101/0.051/		
HOLE SIZE 12 1/4"	CASING & TUBING SIZE  8 5/8"		DEPTH SET			SACKS CEMENT 300 sx. Premium Plus			
7 7/8"	5 1/2"		· · · · · · · · · · · · · · · · · · ·			1150 sx. HLC + 350 sx			
, ,,,	5 1/2		3883'			Class C			
	2 3/8	<u> </u>	<u> </u>	3731'		Class C	$\rho$	+ TN-2	
V. TEST DATA AND REQUE			_L	3/31		.1		-5-89	
	recovery of total volume of		be equal to or	exceed top all	owable for thi	s depth or be fo	-		
Date First New Oil Run To Tank	Date of Test		Producing M	ethod (Flow, pi	ump, gas lift, e	etc.)		F_	
4/6/89	4/7/89			Pumpi	nα				
Length of Test	Tubing Pressure		Casing Pressure			Choke Size			
24 hrs.									
Actual Prod. During Test	Oil - Bbls.		Water - Bbls	•		Gas- MCF			
	83			75		1	40		
GAS WELL									
Actual Prod. Test - MCF/D	Length of Test		Bbls. Conder	sate/MMCF	<del></del>	Gravity of Co	ndensate		
						<u> </u>			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size			
			- r			<u> </u>			
VI. OPERATOR CERTIFIC	CATE OF COMPL	IANCE			ICEDV	ATION F	NIVICIO	NA I	
I hereby certify that the rules and regul					NOEHV	ATION [	7101010	ИV	
Division have been complied with and		above				PR 2 8	1080		
is true and complete to the best of my	knowledge and belief.		Date	<b>Approve</b>	d	IFR & O	1000		
Con The	<b>.</b>			- •					
	(		∥ By_						
Signature Ron Brown Engineer				Original Signed By					
Printed Name		ille	Title		Mil	ke William	15		
4/13/89	505/625-87	60	Title						
Date		one No.	11						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.