

SANTA FE		5
FILE		1
U.S.G.S.		1
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMM. ON
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED

SEP 15 1977

Operator Hondo Drilling Company ✓	
Address P.O. Drawer 2516, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>
Recompletion <input checked="" type="checkbox"/>	Other (Please explain)
Change in Ownership <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Alscott	Well No. 1	Pool Name, Including Formation (N. Turkey Track) "Cisco"	Kind of Lease State, Federal or Fee Federal	Lease No. NM-0924
Location Unit Letter G, 1650' Feet From The North Line and 1980' Feet From The East Line of Section 31 Township 18 S Range 29 E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Co	Address (Give address to which approved copy of this form is to be sent) Box 175, Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Jal, New Mexico 88252					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 31	Twp. 18S	Rge. 29E	Is gas actually connected? Yes	When 9/15/77 9-16-77

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X		X		X
Date Spudded 9/12/77	Date Compl. Ready to Prod. 9/15/77	Total Depth 11,311 Ft.	P.B.T.D. 11,022.61					
Elevations (DF, RKB, RT, GR, etc.) 3421 Gr.	Name of Producing Formation Cisco	Top Oil/Gas Pay 9520'	Tubing Depth 9446'					
Perforations 9518 - 9548 1 shot per ft. 30 Jumbo Jet Cone Shots			Depth Casing Shoe 11,311'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8" - 48 Lb.	362'	375 Sacks - Circulated					
11"	8-5/8" - 24 & 22 Lb	3564'	1710 Sacks - Circulated					
7-7/8"	5-1/2" - 17 & 20#	11,311'	700 Sacks -					
	2-3/8" 4.7 Lb.	9,446'						

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 2.2 Million MCF PD	Length of Test 6 Hours	Bbls. Condensate/MMCF 30	Gravity of Condensate 50
Testing Method (pitot, back pr.) back pressure	Tubing Pressure (Shut-in) 2200	Casing Pressure (Shut-in) (0)	Choke Size 3/8"

I. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

President

9/15/77

(Title)

(Date)

OIL CONSERVATION COMMISSION

SEP 20 1977

APPROVED

BY

TITLE

SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.