

| | | |
|------------------|-----|---|
| DISTRIBUTION | 5 | |
| SANTA FE | 1 | |
| FILE | 1 | ✓ |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | / |
| | GAS | / |
| OPERATOR | / | |
| PRORATION OFFICE | | |

NEW MEXICO OIL CONSERVATION COMMISSION
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

AUG 4 1977

I. Operator **Hondo Drilling Company** ✓ **O. C. C. ARTESIA, OFFICE**

Address **Drawer 2516, Midland, Texas 79702**

Reason(s) for filing (Check proper box) Other (Please explain)

| | | | |
|---------------------|-------------------------------------|---------------------------|--------------------------|
| New Well | <input checked="" type="checkbox"/> | Change in Transporter of: | |
| Recompletion | <input type="checkbox"/> | Oil | <input type="checkbox"/> |
| Change in Ownership | <input type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> |
| | | Dry Gas | <input type="checkbox"/> |
| | | Condensate | <input type="checkbox"/> |

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------------|--|---|-----------------------------|
| Lease Name Alcott Federal | Well No. 2 | Pool Name, including Formation North Turkey Track - Morrow | Kind of Lease State, Federal or Fee Federal | Lease No. NM 0924 |
| Location Unit Letter 0 ; 1980 Feet From The East Line and 660 Feet From The South Line of Section 30 Township 18S Range 29E , 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) Drawer 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 Co. | 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 0 | Sec. 30 |
| | Twp. 18S | Rge. 29E |
| | Is gas actually connected? Yes | When August 3, 1977 |

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. |
| | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | | | |
| Date Spudded 5-20-77 | Date Compl. Ready to Prod. 8-3-77 | | Total Depth 11,341 ft. | | P.B.T.D. 11,270 ft. | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3461' GR | Name of Producing Formation Morrow | | Top Oil/Gas Pay 10,888 ft. | | Tubing Depth 10,828.74 ft. | | | |
| Perforations 18 holes w/4" jet: 10,888' to 10,892'; 10,922' to 10,924'; 10,936' to 10,946' one shot per ft. | | | | | Depth Casing Shoe 11,336 ft. | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17-1/2" | 13-3/8" 48 lb. H-40 | | 394 ft. | | 350 sacks - Circulated | | | |
| 11" | 8-5/8" 32 & 24 lb. | | 3,018 ft. | | 1200 sacks - Circulated | | | |
| 7-7/8" | 5-1/2" 20 & 17 lb. | | 11,336 ft. | | 700 sacks | | | |
| | 2-3/8" | | 10,828.74 ft. | | | | | |

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 Four-point Test To Follow.

| | | | |
|---|--|--|-------------------------------|
| Actual Prod. Test-MCF/D 1,987 MCF/D | Length of Test 8 hrs. | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) 3250 lb. | Casing Pressure (Shut-in) Packer | Choke Size 1" Choke |

VI. 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.



N. W. Outlaw (Signature)
President

August 3, 1977

(Title)

(Date)

OIL CONSERVATION COMMISSION

AUG 9 1977

APPROVED _____, 19
BY **W. A. Gressett**
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