

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

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED

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

JAN 28 '91

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Hondo Drilling Company ✓		Well API No. 30-015-22479
Address P.O. Drawer 2516, Midland, TX 79702-2516		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain) Plugged back to the Atoka Formation		
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>		
If change of operator give name and address of previous operator		

#### II. DESCRIPTION OF WELL AND LEASE

Lease Name Wright Federal Com.	Well No. 2	Pool Name, Including Formation N. Turkey Track Atoka	Kind of Lease <del>State, Federal</del>	Lease No. NM-0925
Location Unit Letter <u>G</u> : <u>1,980</u> Feet From The <u>North</u> Line and <u>1,980</u> Feet From The <u>East</u> Line Section <u>29</u> Township <u>18-S</u> Range <u>29-E</u> , NMPM, <u>Eddy</u> 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 Refining Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 175, Artesia, NM 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) P.O. Box 1492, El Paso, TX 79978	
If well produces oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>29</u>
	Twp. <u>18-S</u>	Rge. <u>29-E</u>
	Is gas actually connected? <u>yes</u>	
	When? <u>January 11, 1991</u>	

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
		<u>XX</u>				<u>XX</u>		
Date Spudded <u>4-8-78</u>	Date Compl. Ready to Prod. <u>6-1-78</u> <u>1-11-91</u>		Total Depth <u>10,490'</u>			P.B.T.D. <u>10,500'</u>		
Elevations (DF, RKB, RT, GR, etc.) <u>3,490' GR</u>	Name of Producing Formation <u>Atoka</u>		Top Oil/Gas Pay <u>10,490'</u>			Tubing Depth <u>10,500'</u>		
Perforations <u>10,490' to 10,500' - 40 holes 1/2" dia. holes</u>						Depth Casing Shoe <u>10,300'</u>		

#### TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>17 1/2"</u>	<u>48 # - H-40</u>	<u>405'</u>	<u>425 sacks circulated</u>
<u>11"</u>	<u>24-32# - K-55</u>	<u>3,015'</u>	<u>1,350 sacks circulated</u>
<u>7 7/8"</u>	<u>17-20# - N-80</u>	<u>11,300'</u>	<u>750 sacks</u>
	<u>2 3/8"</u>	<u>10,500'</u>	

#### 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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
		Casing Pressure	Choke Size <u>2-8-91</u>
Length of Test	Tubing Pressure	Water - Bbls.	Gas - MCF <u>Pe 4 mos. camp Ato</u>
Actual Prod. During Test	Oil - Bbls.		

#### GAS WELL

Actual Prod. Test - MCF/D <u>675 MCF/day</u>	Length of Test <u>24</u>	Bbls. Condensate/MMCF <u>18.34</u>	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) <u>1,370 lb.</u>	Casing Pressure (Shut-in) <u>0-Packer</u>	Choke Size <u>12/64</u>

#### VI. OPERATOR CERTIFICATE OF COMPLIANCE

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



Signature  
Nathan W. Outlaw President  
Printed Name  
January 23, 1991 (915) 682-9401  
Date Telephone No.

#### OIL CONSERVATION DIVISION

Date Approved FEB 7 1991

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

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.