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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes O.C.D. C-104 and C-105
Effective 1-1-55

RECEIVED BY
SEP 19 1984
O. C. D.
ARTESIA, OFFICE

I. Operator
William A. & Edward R. Hudson ✓

Address
Box 198, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------|---|--|------------------------|
| Lease Name Puckett "B" | Well No. 31 | Pool Name, including Formation Maljamar (G-SA) | Kind of Lease Federal State, Federal or Fee | Lease No. LC-029415 |
| Location Unit Letter <u>P</u> ; <u>1295'</u> Feet From The <u>south</u> Line and <u>330'</u> Feet From The <u>east</u> Line of Section <u>25</u> Township <u>17S</u> Range <u>31E</u> , NMPM, <u>Eddy</u> County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---|---|------------|-------------|-------------|-----------------------------------|-----------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Co. | Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 159, Artesia, N. M. 88210 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum C. | Address (Give address to which approved copy of this form is to be sent) Bartlesville, Ok. 74003 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit F | Sec. 25 | Twp. 17S | Rge. 31E | Is gas actually connected? Yes | When Aug. 15, 1960 |

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) X. | Oil Well X. | Gas Well X. | New Well X. | Workover | Deepen | Plug Back | Same Res'v. | Diff. Re |
| Date Spudded Aug. 13, 1984 | Date Compl. Ready to Prod. Sept. 6, 1984 | | Total Depth 3955 | | P.B.T.D. 3953 | | | |
| Elevations (DF, RKB, RT, GK, etc.) 3884 KB | Name of Producing Formation Grayburg-San Andres | | Top Oil/Gas Pay 3800 | | Tubing Depth 3716 | | | |
| Perforations 3800-06, 3815-19, 3825-51, 3862-68, 3905-09, 3934-46 and 3950-53 | | | | | Depth Casing Shoe 3953 | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE 12 1/4" | CASING & TUBING SIZE 8 5/8" | | DEPTH SET 860' | | SACKS CEMENT 680 | | | |
| 7 7/8" | 5 1/2" | | 3953' | | 575 + 400 | | | |
| | 2 1/2" | | 3716 | | | | | |

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 of hole for this depth or be for full 24 hours)

| | | | |
|--|----------------------|---|---------------------------|
| Date First New Oil Run To Tanks Sept. 6, 1984 | Date of Test | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 21 1/2 hrs. | Tubing Pressure 0 | Casing Pressure 0 | Choke Size -- |
| Actual Prod. During Test | Oil - Bbls. 83 | Water - Bbls. 190 | Gas - MCF Not measured |

Note: Produced water is returned to formation in waterflood project.

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |

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.

Ralph L May
(Signature)
Consulting Engineer
(Title)
Sept. 19, 1984
(Date)

OIL CONSERVATION COMMISSION
SEP 25 1984
APPROVED _____, 19____
BY _____ Original Signed By
Leslie A. Clements
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 deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for a well on new and recompleted wells.
Fill out only Sections I, II, III, and VI for change of well name or number, or transporter, or other such change of con