

OIL CONSERVATION DIVISION

Drawer DD Artesia, NM.

DISTRICT OFFICE #2

Jan. thru Apr. 1985

NO. 2180 N

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE March 13, 1985

PURPOSE ALLOWABLE ASSIGNMENT - NEW WELL

Effective March 1, 1985 an allowable of 43 barrels of oil per day is hereby assigned to H & S Oil Company, Lattion #2-P-23-18-26 in the Atoka Glorieta Yaso Pool.

L - P

MP - P

Mar. Total - 1333 bbls.

Apr. Total - 1290 bbls.

Form. - Yaso
Perfs. - 2835' - 3540'
TD - 3666'
Comp. - 1-4-85

LAC:fc

H & S Oil Co.

NRC

PP

OIL CONSERVATION DIVISION


DISTRICT SUPERVISOR

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SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input type="checkbox"/>

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE

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

RECEIVED BY
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
MAR - 6 1965
O. C. D.
ARTESIA, OFFICE

I. Operator
H & S Oil Company ✓
Address
Suite 303, First Natl. Bank Bldg. - Artesia, NM 88210
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
EX # 2-702 until 5/11/85
EX # 2-702 6/15/85

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lattion	Well No. 2	Pool Name, Including Formation Atoka, Glorieta, Yeso	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter P ; 660 Feet From The South Line and 660 Feet From The East Line of Section 23 Township 18S Range 26E , NMPM, Eddy 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 Company	Address (Give address to which approved copy of this form is to be sent) Box 159 - Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma 74004					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 23	Twp. 18S	Rge. 26E	Is gas actually connected? No.	When

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 12/14/84	Date Compl. Ready to Prod. 1/4/85		Total Depth 3555' 3666'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3301 GR	Name of Producing Formation Yeso		Top Oil/Gas Pay 2835		Tubing Depth 3424'			
Perforations 2835 to 3082 18 shots .50 3203 to 3540 18 shots .50					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
10 3/4"	8 5/8"		913'		700 sks.			
7 7/8"	5 1/2"		3666'		670 sks.			
	2 7/8"		3424'					

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)

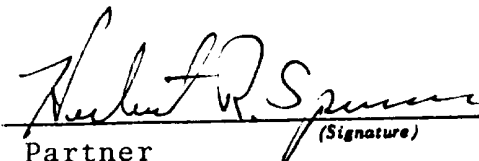
Date First New Oil Run To Tanks 1/26/85	Date of Test 3/3/85	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size 3-15-85 Comp + BK
Actual Prod. During Test	Oil - Bbls. 43	Water - Bbls. 378	Gas - MCF 30

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.


Partner (Signature)

3/6/85

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 12 1985, 19
ORIGINAL SIGNED
BY LARRY BROOKS
GEOLOGIST - NMOC
TITLE

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.