State of New Mexico Submit 5 Copies Appropriate District Office DISTRICT I Form C-104 Revised 1-1-89 Energy, Minerals and Natural Resources Department See Instructions at Bottom of Page RECEIVED P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 PR 1 9 1991 CONSERVATION DIVISION P.O. Box 2000 Santa Fe, New Mexico 87504-2088 DISTRICT III O. C. D. 1000 Rio Brazos Rd., Aztec, NM 87410 TESIA ECUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator 3001526428 Hondo Oil & Gas Company Address P. O. Box 2208, Roswell, NM 88202 Reason(s) for Filing (Check proper box) Other (Please explain) Change in Transporter of: New Well \mathbf{x} Dry Gas Recompletion Oil Change in Operator Casinghead Gas X Condensate If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease No. Well No. | Pool Name, Including Formation Kind of Lease XMAN, Federal of XMX Pitcher Federal Red Lake-Glorieta/Yeso LC-054205 Location 990 Feet From The North Line and 1700 Unit Letter Feet From The Line 27E 8 18S Township Range , NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) XX P. O. Box 1558, Breckenridge, TX 76024 Koch Oil Company Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas X Phillips 66 Nat'l Gas Company 4001 Penbrook, Odessa, TX 79762 Twp. Is gas actually connected? If well produces oil or liquids, Unit Rge. When? give location of tanks. 8 18S | 27E 01/21/91 Α Yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Designate Type of Completion - (X) Х Total Depth Date Spudded Date Compl. Ready to Prod. 3006' Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Tubing Depth 29731 3373' GR 2536' Perforations Depth Casing Shoe plus previous perfs. 2832'-2901' 2536'-2764' TUBING, CASING AND CEMENTING RECORD HOLE SIZE **CASING & TUBING SIZE** ost ID-3 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.) Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test 4/11/91 Pumping Casing Pressure 50 Choke Size Length of Test Tubing Pressure 24 hrs. Gas- MCF Actual Prod. During Test Oil - Bbls Water - Bbls. 77 75 40

CACWELL

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	
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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.

Karla LeJeune Regulatory Secretary Printed Name

(505)625-6745

04/17/91 Date Telephone No.

OIL CONSERVATION DIVISION

APR 2 3 1991 Date Approved _

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT ! Title

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

Title

- 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.