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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

MAY 2 1975

ARTESIA OFFICE

Operator WESTALL - MASK		
Address DRAWER 1477, ROSWELL NM 88201		
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"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead 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 HINKLE "B" FEDERAL	Well No. 4	Pool Name, Including Formation SHUGART	Kind of Lease FED LC	Lease No. 029392B
Location				
Unit Letter J	1650	Feet From The SOUTH	Line and 1650	Feet From The EAST
Line of Section 27	Township 18 SOUTH	Range 31 EAST	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 CRUDE OIL PURCHASING CO	Address (Give address to which approved copy of this form is to be sent) BOX 175, ARTESIA NM 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS PETRO CO	Address (Give address to which approved copy of this form is to be sent) 4TH & WASHINGTON, ODESSA TEXAS 79701					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 27	Twp. 18	Rge. 31	Is gas actually connected? YES	When 4/25

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 11/20-74	Date Compl. Ready to Prod. 12/7-74		Total Depth 3989		P.B.T.D. 3920 depth 9-330			
Elevations (DF, RKB, RT, GR, etc.), GR 3640	Name of Producing Formation PENROSE QUEEN		Top Oil/Gas Pay 3350		Tubing Depth 3606			
Perforations / shot @ 3342, 46, 50, 54, 60, 62, 64, 66, 68, 70, 74, 78, 3418, 28, 68, 3470, 80, 3594, 96, 98, 3602, 06.					Depth Casing Shoe 3989			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11	8 5/8 28#		667		300			
7 7/8	5 1/2 14.62 #		3989		300			
4 1/2	2 3/8		3606					

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 4/25	Date of Test 4/25	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24 HR	Tubing Pressure	Casing Pressure	Choke Size NONE
Actual Prod. During Test 8	Oil - Bbls. 8	Water - Bbls.	Gas - MCF T S T M

GAS WELL

Actual Prod. Test-MCF/D T S T M	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.

Josh Mask
(Signature)
CO-OWNER
(Title)
4/29/75
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 6 1975**
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 completed wells.