

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

L

DE VALOR

Well API No.

Hudson Energy Resources Corporation

Address

P.O. Box 25956, Oklahoma City, OK 73125-0956

Reason(s) for Filing (Check proper box)

Other (Please explain)

New Well

Change in Transporter of:

Recommendation

Oil

Dry Gas

Change in Operator

Casinghead Gas

Condensate

If change of operator give name and address of previous operator

Hadson Petroleum (USA), Inc., P.O. Box 26770, Oklahoma City, OK 73126

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Little Jewel Com.	1	South Carlsbad (Morrow)	State, Federal or Fee	
Location				
Unit Letter	F	1980	Feet From The	North Line and
			1900	Feet From The
			West	Line
Section	31	Township	22S	Range
			27E	NMPM,
			Eddy	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

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)

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
 Llano, Inc. - 25% P.O. Box 1320, Hobbs, NM 88240
 El Paso Natural Gas Co. - 75% P.O. Box 1492, El Paso, TX 79978

El Paso Natural Gas Co.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
If well produces oil or liquids, give location of tanks.					Yes	9/30/71
						10/05/76

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

IV. COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

TUBING, CASING AND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET
		SACKS CEMENT
		Part ID-3
		24-16-93
		the up name

V. TEST DATA AND REQUEST FOR ALLOWABLE

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.)

OIL WELL (Test must be after recovery of total volume of total oil and must be equal to or greater than 1000 bbls.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

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 Bruce E. Hankins
 Printed Name Bruce E. Hankins Engineering Technician Title
04/06/93 (405) 232-2212
 Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 12 1993

By _____

Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 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.