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| TRANSPORTER | OIL | |
| | GAS | / |
| OPERATOR | | |
| PRORATION OFFICE | | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

APR 13 1977

| | | | | | |
|--|-------------------------------------|--------------------------------|--------------------------|--------------------------------|--|
| Operator | | HNG Oil Company ✓ | | O. C. C. | |
| Address | | P. O. Box 2267, Midland, Texas | | ARTESIA, OFFICE 79701 | |
| Reason(s) for filing (Check proper box) | | | | | |
| New Well | <input checked="" type="checkbox"/> | Change in Transporter of: | | Other (Please explain) | |
| Recompletion | <input type="checkbox"/> | Oil | <input type="checkbox"/> | Well was drilled and has been | |
| Change in Ownership | <input type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> | shut-in since March 14, 1975, | |
| | | Dry Gas | <input type="checkbox"/> | due to no pipeline connection. | |
| | | Condensate | <input type="checkbox"/> | | |
| If change of ownership give name and address of previous owner | | | | | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | | | | | | |
|-----------------|---------------------|----------|---------------|--------------------------------|------------------|---------------|------|----------|------------|
| Lease Name | Bowden Federal "25" | Well No. | 1 | Pool Name, including Formation | Gawford (Morrow) | Kind of Lease | Fed. | Case No. | NM 0353187 |
| Location | | | | | | | | | |
| Unit Letter | K L | 1980 | Feet From The | South | 660 | Feet From The | East | | |
| Line of Section | 25 | Township | 24-S | Range | 26-E | NMEM | Eddy | County | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | |
|--|--------------------------|---------------|-------------------------------------|--|---------------------------------|
| Name of Authorized Transporter of Oil | <input type="checkbox"/> | or Condensate | <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| None | | | | | |
| Name of Authorized Transporter of Casinghead Gas | <input type="checkbox"/> | or Dry Gas | <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| Natural Gas Pipeline Company | | | | 122 S. Michigan Ave., Chicago, Ill. 606 | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? When |
| | | | | | Yes 4-09-77 |

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 | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'tv. | Diff. Res'tv. |
| | | X | X | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | |
| 2-23-73 | 5-15-73 | | 12,125' | | 11,350' | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Cas. Pay | | Tubing Depth | | | |
| 3362' GR | Morrow | | 11,210' | | 9,058' | | | |
| Perforations | | | | | Depth Casing Shoe | | | |
| 11,210-11,220' | | | | | 12,125' | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17-1/2" | 13-3/8" | | 431' | | 450 SX. | | | |
| 12-1/2" | 10-3/4" | | 2164' | | 725 SX. | | | |
| 9-1/2" | 7-5/8" | | 9200' | | 900 SX. | | | |
| 6-1/2" | 5" | | 12,125' | | 500 SX. | | | |

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 | XXXXXXX | XXXXXXXXXXXXXXXXXXXXXXXXXXXX | |
| Length of Test | 2-7/8" Tubing Set @ 9058' | | |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |
| | | | |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MCF | Gravity of Condensate |
| 1085 | 24 hrs. | 0 | 0 |
| Testing Method (pitot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |
| Back Press. | 3131 | 500 | 10 1/2/64 |

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.

Ouida Roach
(Signature)
Production Clerk
(Title)
4-12-77
(Date)

OIL CONSERVATION COMMISSION
APPROVED MAY 5 1977
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.