

EL PASO NATURAL GAS COMPANY

DATE 7-25 19 80

RECEIVED

JUL 30 1980

RECOMPLETED

ARTESIA OFFICE

ADVICE ON WELLS TIED INTO GAS GATHERING SYSTEMS

Name of Producer HNG Oil Company

Well Name and Number Woods 9 Com #1

Location 1980' FSL, 2000' FEL, Sec. 9, T-24-S, R-28-E, Eddy Co., NM

Pool Name West Malaga

Producing Formation Atoka

Top of Gas Pay 11,557

Oil or Gas Well Gas

Gas Unit Allocation 320 acres

Date Tied Into Gathering Systems 6-30-80

Date of First Delivery * 7-25-80

Gas Gathering System South Carlsbad Gathering System

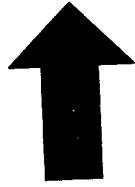
Processed through Gasoline Plant (yes or no) No

Station Number 58-318-01

Remarks: This well recompleted from Morrow to Atoka zone.

* The well produced into EPNG system on 6-30-80 to obtain Multipoint test data;
then shut back in until 7-25-80.

Site Code: 29648-1-01By: M H. Metchum Dispatching



LTR



Job separation sheet

J. OF COPIES RECEIVED	
DISTRIBUTION	
ANTA FE	1
FILE	1
S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

Operator HNG Oil Company		RECEIVED
Address P.O. Box 2267 Midland, Texas 79702		JUL 14 1980
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well	<input type="checkbox"/>	Change in Transporter of:
Recompletion	<input checked="" type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
		Dry 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 Woods 9 Com.	Well No. 1	Pool Name, Including Formation West Malaga (Atoka)	Kind of Lease State, Federal or Fee	Lease No. 16853
Location Unit Letter J ; 1980 Feet From The South Line and 2000 Feet From The East				
Line of Section 9 Township 24S Range 28E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input 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 checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	P.O. Box 1492, El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? Yes	
	When 6-30-80 May 1978	

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'v.	Diff. Res'v.
		X				X		X
Date Spudded PB 5-7-80	Date Compl. Ready to Prod. 6-24-80	Total Depth 12,752'	P.B.T.D. 11,483'					
Elevations (DF, RKB, RT, GR, etc.) 3024.3 GR	Name of Producing Formation Atoka	Top Oil/Gas Pay 11,279'	Tubing Depth TX 64 9930'					
Perforations 11,279 - 11,380	Depth Casing Shoe 10269'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2	13-3/8	677	400 TLW & 200 C1C					
12-1/4	9-5/8	2453	1500 TLW & 300 C1C					
8-1/8	7	10250	800 TLW & 500 C1H					
Tubing	2-3/8"	9930'						

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	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 1952	Length of Test 24 hours	Bbls. Condensate/MMCF 0	Gravity of Condensate 0
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 5761'	Casing Pressure (shut-in) Packer	Choke Size 3/4"

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.

Betty A. Gildon
(Signature)
Regulatory Clerk
(Title)
July 11, 1980
(Date)

OIL CONSERVATION COMMISSION
JUL 21 1980
APPROVED
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.
Form C-104 must be filed for each well in multiple.