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LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input checked="" type="checkbox"/>
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COM. SION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Superseding Old C-104 and C-110
Effective 1-1-65

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APR 30 1979

I. Operator
HNG Oil Company
Address
P.O. Box 2267 Midland, TX 79702
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 6-25-79
UNLESS AN EXCEPTION TO Rule 306
IS OBTAINED
If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name Kelly 5 Well No. 2 Pool Name, including Formation Herradura Bend Del. Kind of Lease State, Federal or Fee Fee Lease No. -
Location
Unit Letter C 1650 Feet From The West Line and 990 Feet From The North
Line of Section 5 Township 23S Range 28 E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
The Permian Corporation Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1183 Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit F Sec. 5 Twp. 23 S Rge. 28 E Is gas actually connected? When

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. ☐
Date Spudded 3/16/79 Date Compl. Ready to Prod. 3/28/79 Total Depth 2535 P.B.T.D. 2487
Elevations (DF, RKB, RT, GR, etc.) 3023' GR Name of Producing Formation Delaware Top Oil/Gas Pay 2461 Tubing Depth 2455
Perforations 2465, 2467, 2469, 2471 Depth Casing Shoe 2535
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12-1/4" 8-5/8" 470' 375
7-7/8" 5-1/2" 2535" 250
2-3/8" 2455'

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 4-25-79 Date of Test 4-26-79 Producing Method (Flow, pump, gas lift, etc.) Pumping
Length of Test 24 Hours Tubing Pressure - Casing Pressure 0 Choke Size 10-24
Actual Prod. During Test 26 bbls Oil-Bbls. 26 Water-Bbls. 68 Gas-MCF 5-4
TSTM

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

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 Betty A. Gildon
(Signature)
Regulatory Clerk
(Title)
4/26/79
(Date)
OIL CONSERVATION COMMISSION
APR 30 1979
APPROVED BY N. A. Gressitt
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.