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

NEW MEXICO OIL CONSERVATION COM. SION
REQUEST FOR ALLOWABLE

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

RECEIVED BY
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
MAY 07 1985
O. C. D.
ARTESIA, OFFICE

Operator
Hamon Oil Company

Address
611 Petroleum Building, Midland, Texas 79701

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"/>	Dry Gas <input type="checkbox"/>
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

Request 10,000 MCF testing Gas allowable.

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE.

Lease Name State V-249	Well No. 1	Pool Name, including Formation Undesignated Atoka	Kind of Lease State, Federal or Fee State	Lease No. NM V-249
Location				
Unit Letter M	660 Feet From The South Line and 660 Feet From The West			
Line of Section 36	Township 23S	Range 26E	NMPM, Eddy County	

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)
Fina Supply, Inc.	P. O. Box 2159, Dallas, Texas 75201
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 1384, Jal, New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. Is gas actually connected? When
	M 36 23S 26E Yes

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

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 started workover started 4-22-85	Date Compl. Ready to Prod. 5-6-85	Total Depth 12,020'	P.B.T.D. 11,437'					
Elevations (DF, RKB, RT, GR, etc.) 3245.3' Gr 3259' KB	Name of Producing Formation Atoka	Top Oil/Gas Pay 11,289'	Tubing Depth 11,225'					
Perforations 11,290' - 11,298	Depth Casing Shoe 12,019'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	453'	550
12-1/4"	9-5/8"	5,479'	3,600
8-3/4"	7"	10,469'	1,250
6"	4-1/2"	12,019'	260

TEST DATA AND REQUEST FOR ALLOWABLE est must be after recovery 2-3/8" 11,225' time 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

C. 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.

Cecil W. Barton
(Signature)
Production Engineer
(Title)
May 6, 1985
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 7 1985**, 19__

BY ORIGINAL SIGNED
BY LARRY BROOKS
GEOLOGIST - NMOC

TITLE _____

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.