

DISTRIBUTION		
SANTA FE		
FILE		
U.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

RECEIVED

AUG 2 1972

Operator HUTCHCO PRODUCTION	
Address 105-B Gulf Bldg., Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership <input checked="" 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 Hiram W. Keith, Box 844, Kermit, Texas 79745	

DESCRIPTION OF WELL AND LEASE

Lease Name Eddy State	Well No. A-3	Pool Name, Including Formation North Mason Delaware	Kind of Lease State, Federal or Fee State	Lease No. E-920
Location Unit Letter E ; 1757 Feet From The North Line and 660 Feet From The West Line of Section 36 Township 26-S Range 31-E, NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, Texas 77001			
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) Phillips Bldg., Odessa, Texas 79760			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 36	Twp. 26S	Rge. 31E
				Is gas actually connected? Yes
				When Unknown 11-55

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input checked="" type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input checked="" type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod. 7-9-72		Total Depth 4115		P.B.T.D. Same			
Elevations (DF, RKB, RT, GR, etc.) 3110 RT	Name of Producing Formation Delaware		Top Oil/Gas Pay 4090		Tubing Depth 4115			
Perforations Open Hole 4090-4115					Depth Casing Shoe 4090			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 7-7/8	CASING & TUBING SIZE 5-1/2		DEPTH SET 4090		SACKS CEMENT 425			
	2-3/8		4097					

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 7/21/72	Date of Test 7/21/72	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 HR	Tubing Pressure 0	Casing Pressure 0	Choke Size
Actual Prod. During Test 72	Oil-Bbls. 52	Water-Bbls. 20	Gas-MCF 5

GAS WELL

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

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.

David Hutchins (Signature)  
Operator  
(Title)  
July 28, 1972  
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 2 1972  
BY W. A. Gressett  
TITLE OIL AND GAS INSPECTOR

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.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.