

| | | |
|------------------------|-----|---|
| NO. OF COPIES RECEIVED | | |
| DISTRIBUTION | | |
| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | 1 |
| | GAS | 1 |
| OPERATOR | | 1 |
| PRODUCTION 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-
Effective 1-1-65

NOV 8 4 1980

Operator WILLIAM N. BEACH ✓
Address BOX 3669, Midland, TX 79702

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 1-24-81
UNLESS AN EXCEPTION TO Rule 306
IS OBTAINED
BY # 2-475 Expires 5-6-81

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------------|---|---|-----------------------------|
| Lease Name <u>Hinkle State</u> | Well No. <u>1</u> | Pool Name, including Formation <u>Red Lake East, Q-G</u> | Kind of Lease State, Federal or Fee <u>State</u> | Lease No. <u>E-10068</u> |
| Location Unit Letter <u>N</u> ; <u>660</u> Feet From The <u>south</u> Line and <u>2287</u> Feet From The <u>West</u> Line of Section <u>25</u> Township <u>16-S</u> Range <u>28-E</u> , NMPM, <u>Eddy</u> County | | | | |

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|---|---|---------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>THE PERMIAN CORPORATION</u> | Address (Give address to which approved copy of this form is to be sent) <u>BOX 1183, Houston, TX 77001</u> | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips Petroleum Company</u> | Address (Give address to which approved copy of this form is to be sent) <u>100 Pioneer Bldg. Bartlesville, OK 74004</u> | |
| If well produces oil or liquids, give location of tanks. | Unit <u>N</u> | Sec. <u>25</u> |
| | Twp. <u>16-S</u> | Rge. <u>28-E</u> |
| | Is gas actually connected? <u>NO</u> When | |

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

V. COMPLETION DATA

| | | | | | | | | |
|--|---|-----------------------------------|--|-----------------------------------|----------------------------------|------------------------------------|--------------------------------------|---------------------------------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well <input type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res't. <input type="checkbox"/> | Diff. Res't. <input type="checkbox"/> |
| Date Spudded <u>6-11-80</u> | Date Compl. Ready to Prod. <u>7-24-80</u> | | Total Depth <u>1735</u> | | P.B.T.D. <u>1731</u> | | | |
| Elevations (DE, RAB, RT, CR, etc.) <u>3603.9 GL</u> | Name of Producing Formation <u>Penrose</u> | | True Oil/Gas Pay <u>1651</u> | | Tubing Depth <u>1646</u> | | | |
| Perforations <u>1651-96 9 holes</u> | | | | | Depth Casing Shoe <u>1731</u> | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| <u>11"</u> | <u>8-5/8"</u> | | <u>325</u> | | <u>150 cmt.</u> | | | |
| <u>8"</u> | <u>4-1/2"</u> | | <u>1731</u> | | <u>125 sx class "c" 50/50</u> | | | |
| | | | | | <u>Poz mix + 2% Gel + 5#</u> | | | |
| | | | | | <u>salt per sack</u> | | | |

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 <u>7-24-80</u> | Date of Test <u>8-27-80</u> | Producing Method (Flow, pump, gas lift, etc.) <u>Flow</u> | |
| Length of Test <u>24 hr.</u> | Tubing Pressure <u>0-60#</u> | Casing Pressure <u>320#</u> | Choke Size <u>12/64"</u> |
| Actual Prod. During Test <u>9.0</u> | Oil-Bbls. <u>9.0</u> | Water-Bbls. <u>1.0</u> | Gas-MCF <u>12-5-80</u> |

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 |

I. 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.

M. J. Harrison

Production Clerk

11-21-80

(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 2 1980, 19

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 deviate 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 multiple completed wells.