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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
HOBBS OFFICE - O.C.O.
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
MAY 31 7 51 AM '67

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

I. Operator: **H. C. HOOD**

Address: **522 FIRST NATIONAL BANK BLDG., MIDLAND, TEXAS 79701**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Oil ☐ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE **UNDESIGNATED**

Lease Name **WARREN STATE 23** Lease No. **K-5134** Well No. **1** Pool Name, including Formation **Middle Lane Perno Penn** Kind of Lease **State**

Location: Unit Letter **B** ; **810** Feet From The **North** Line and **1980** Feet From The **East**

Line of Section **23** Township **10-S** Range **33-E** , NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Pan American Petroleum Corporation (Trucks) **Box 1725, Midland, Texas 79701**

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum Corporation **Box 1589, Tulsa, Oklahoma 74102**

If well produces oil or liquids, give location of tanks. Unit **B** Sec. **23** Twp. **10-S** Rge. **33-E** Is gas actually connected? **No** When **Unknown**

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4/21/67	Date Compl. Ready to Prod. 5/24/67	Total Depth 9812	P.B.T.D. -					
Elevations (DF, RKB, RT, GR, etc.) 4202.1' Gr	Name of Producing Formation Bough "C"	Top Oil/Gas Pay 9734	Tubing Depth 9756					
Perforations 9741', 9745' & 9748' - 2 shots each	Depth Casing Shoe 9812'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	350'	350
11"	8 5/8"	3084'	350
7 7/8"	5 1/2"	9812'	300
	2" FUE	9756	

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 5/25/67	Date of Test 5/26/67	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 330	Casing Pressure Pkr.	Choke Size 20/64th
Actual Prod. During Test 360	Oil - Bbls. 360	Water - Bbls. 2	Gas - MCF 414,000

GAS WELL

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

Agent **May 29, 1967**

OIL CONSERVATION COMMISSION

APPROVED **Leslie A. Clements**, 19 **1967**

BY **Leslie A. Clements**

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.

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

HOBBBS OFFICE 0.C.C.

MAY 31 7 21 AM '85