

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWAY
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I.

Operator
Julian Ard

Address
P. O. Box 2361, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐
Casinghead Gas ☐

Dry Gas ☐
Condensate ☐

Other (Please explain)

Designate transporter of
casinghead gas

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Harton-State	Well No. 1	Pool Name, Including Formation Saywer West (San Andres)	Kind of Lease State, Federal or Fee	State East	LG002
Location Unit Letter 0	Feet From The 660	South	Line and 1980	Feet From The East	
Line of Section 32	Township 9S	Range 37E	NMPM,	Lea	Coun

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Cities Service Oil Company	P.O. Box 300, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? YES When 12-1-76

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 <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. P. <input type="checkbox"/>		
Date Spudded 5-05-76	Date Compl. Ready to Prod. 5-28-76	Total Depth 5050	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.) 3799 GR	Name of Producing Formation San Andres	Top Oil/Gas Pay	Tubing Depth 4950
Perforations 4955-4970			Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE 12-1/4 7-7/8	CASING & TUBING SIZE 8-5/8 5-1/2 2-3/8	DEPTH SET 405 5050 4950	SACKS CEMENT 275 275

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 to able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 5-28-76	Date of Test 7-06-76	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure 0	Casing Pressure 0	Choke Size -
Actual Prod. During Test	Oil-Bbls. 11	Water-Bbls. 3	Gas-MCF less than 1 MC

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 Thompson
(Signature)

Agent

(Title)

November 17, 1976

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

Betty Thompson
Betty Thompson
Betty Thompson
This form is to be filed in compliance with RULE 1104
If this is a request for allowable for a newly drilled or
well, this form must be accompanied by a tabulation of the
tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely
able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes
well name or number, or transporter, or other such change of
Separate Forms C-104 must be filed for each pool in

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JAN 11 1977

OIL CONSERVATION COMM.
HOBBS, N. M.

RECEIVED

DEC 10 1976

OIL CONSERVATION COMM.
HOBBS, N. M.