

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

NEW MEXICO OIL CONSERVATION COMMISS
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

Operator Hilliard Oil & Gas, Inc.		
Address 3000 N. Garfield, Suite 120, Midland, Texas 79705		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Approval to flare casinghead gas from this well must be obtained from the Minerals Management Service. <i>BAM</i>
Recompletion <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

3-1-85

I. DESCRIPTION OF WELL AND LEASE

Lease Name Hilliard Federal "B"	Well No. 1	Pool Name, Including Formation Cedar Point - Strawn	Kind of Lease State, Federal or Fee Federal	Lease No. NM-15011
Location Unit Letter <u>L</u> <u>460</u> Feet From The <u>West</u> Line and <u>1980</u> Feet From The <u>South</u> Line of Section <u>26</u> Township <u>15S</u> Range <u>30E</u> , NMPM, <u>Chaves</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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cabot Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) 7120 I-40 West, Amarillo, TX 79106					
If well produces oil or liquids, give location of tanks.	Unit <u>L</u>	Sec. <u>26</u>	Twp. <u>15S</u>	Rge. <u>30E</u>	Is gas actually connected? <u>No</u>	When <u>Est. 1-10-85</u>

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'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded <u>10/13/84</u>	Date Compl. Ready to Prod. <u>12/11/84</u>		Total Depth <u>10,800'</u>		P.B.T.D. <u>10,767'</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>4087' GL, 4105' RKB</u>	Name of Producing Formation <u>Strawn</u>		Top Oil/Gas Pay <u>10,672'</u>		Tubing Depth <u>10,571'</u>			
Perforations <u>10,672' - 10,698'</u>					Depth Casing Shoe <u>10,800'</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>17 1/2</u>	<u>13 3/8</u>		<u>500</u>		<u>525 sx CI "C"</u>			
<u>11</u>	<u>8 5/8</u>		<u>3350</u>		<u>960 sx Lite + 300 sx CI "C"</u>			
<u>7 7/8</u>	<u>5 1/2</u>		<u>10800</u>		<u>550 sx CI "H"</u>			
	<u>2 3/8</u>		<u>10,571</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>12/6/84</u>	Date of Test <u>12/11/84</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Flowing</u>	
Length of Test <u>24 hrs.</u>	Tubing Pressure <u>330#</u>	Casing Pressure <u>Pkr.</u>	Choke Size <u>19/64"</u>
Actual Prod. During Test <u>222</u>	Oil - Bbls. <u>222</u>	Water - Bbls. <u>0</u>	Gas - MCF <u>560</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

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.

W. L. Motley
W. L. Motley (Signature)
Sr. Production Engineer (Title)

December 11, 1984
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 14 1984, 19____
ORIGINAL SIGNED BY JERRY SEXTON
BY DISTRICT SUPERVISOR
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.

RECEIVED

DEC 13 1984

OFFICE OF THE
ATTORNEY GENERAL