

P. O. BOX 7088  
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

John S. Goodrich

Address  
4000 N. Big Spring, Suite 109, Midland, Texas 79705

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter oil:  
Recompletion ☐ Oil ☐ Dry Gas ☒  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

160 acres  
a2 .50If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Hondo Federal	1	SE Chaves-Queen Gas Area Assoc.	State, Federal or Free Federal	NM080219

Location  
Unit Letter 11 : 1980 Feet From The North Line and 660 Feet From The East  
Line of Section 21 Township 13-S Range 31-E . NMPM, Chaves County

## 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)
Cabot Pipeline Corporation	7120 I-40 West, Amarillo, TX 79106

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒  
Is gas actually connected? ☐ When  
If well produces oil or liquids, give location of tanks.

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv. Diff. Res.
		X	X				

Date Spudded 1-11-85 Date Compl. Ready to Prod. 2-18-85 Total Depth 2800' P.B.T.D. 2782'  
Elevations (DF, RKB, RT, GR, etc.) 4167 RKB Name of Producing Formation Queen Top Oil/Gas Pay 2742' Tubing Depth 2748'  
Perforations 2742" to 2747' (11 holes) Depth Casing Shoe 2800'

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	359'	250 sx. Class "C"
7 7/8"	4 1/2"	2800'	300 sx. 50/50 poz. + "C"
	2 3/8"	2748'	

## 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 oil able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)

Length of Test Tubing Pressure Casing Pressure Choke Size  
Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas - MCF

## GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
420	one hour	-0-	----

Testing Method (pilot, back pr.) Back pressure test Tubing Pressure (Shut-in) 545 psia Casing Pressure (Shut-in) 558 psia Choke Size 16/64

## CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Operator

(Title)

5-23-85

(Date)

## OIL CONSERVATION DIVISION

APPROVED Feb 11 1987, 19Orig. Signed by  
BY Paul Kautz  
Geologist

TITLE

This form is to be filed in compliance with RULE 100.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of condition.