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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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-110
Effective 1-1-65

I.

Operator Lone Star Producing Company	
Address Box 4815, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name H. M. (80) State	Well No. 1	Pool Name, Including Formation Wildcat Tres Papalotes- R-3948 Pennsylvanian	Kind of Lease State, Federal or Fee State	Lease No. K-5024
Location				
Unit Letter B	1980	Feet From The East Line and 660	Feet From The North	
Line of Section 33	Township 14 S	Range 34 E	NMPM, Lee	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) None					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 33	Twp. 14 S	Rge. 34 E	Is gas actually connected? No	When ---

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)	X	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-4-69	Date Compl. Ready to Prod. 1-28-70	Total Depth 10,708'		P.B.T.D. 10,663'					
Elevations (DF, RKB, RT, GR, etc.) 4136' RKB	Name of Producing Formation Saunders Line	Top Oil/Gas Pay 10,402'		Tubing Depth 10,406'					
Perforations 10,468'-10,474' & 10,481'-10,488'		Depth Casing Shoe 10,708'							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
17-1/2"	13-3/8"	416'		400					
11"	8-5/8"	4,530'		500					
7-7/8"	5-1/2"	10,708'		160					
	2-3/8" Tubing	10,406'		Packer at 10,406'					

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 2-1-70	Date of Test 2-2-70	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 335 psig	Casing Pressure Packer	Choke Size 3/8"
Actual Prod. During Test	Oil - Bbls. 449.88	Water - Bbls. - 0 -	Gas - MCF 710

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.

C. R. Ramsey
(Signature)
District Production Superintendent
(Title)

February 3, 1970
(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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.