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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico - Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Anesia, NM 88210

P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

000 Rio Brazos Rd., Aziec, NM 87410							AUTHORI					
Operator	TO TRANSPORT OIL AND NATURAL GAS							Wai 7	Well API No.			
Hawkins Oil & Gas, I	nc.							30	025_214	435		
Address			<b>.</b>	_								
400 So. Boston, Suite Reason(s) for Filing (Check proper box)	e 800.	Tulsa	OK.		4103	DX Out	s (Please expl	ain)			<del></del>	
New Well		Change in	Transpo	xter (	of:		•	·				
Recompletion	Oil		Dry Ga			Ff	fective	12-01-9	13			
Change in Operator		nd Cas 🗌								<del> </del>		
change of operator give name ad address of previous operator Texa	co Expl	oratio	n and	d_P	rodu	ction Ir	nc P.O.	Box 730	Hobbs,	NM 8824	0-2528	
I. DESCRIPTION OF WELL	AND LE	ASE										
Lease Name	Well No. Pool Name, Includin					V &			Sadamil on Ean			
STATE P		12	LOV	ıng	ton	Paddock				7789	140	
ocatioa D	. 6	60	F F-	1	n. N	orth ris	and <u>660</u>	E.	et From The _	West	Line	
Unit LetterU	_ :		. rea ri	roca :	1110	<u> </u>			~ 1 10111 112 _			
Section 32 Townsh	<u>ip 1</u>	6S	Range		37E_	, N	ирм,	<u>l ea</u>			County	
II. DESIGNATION OF TRAN	NSPORTE	R OF O	II. AN	D N	NATUI	RAL GAS						
Name of Authorized Transporter of Oil		or Conder			<u>יייי</u>		e address to w	hich approved	copy of this fo	orm is to be se	nt)	
SHUT-IN							Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casis SHUT-IN	ighead Gas		or Dry	Gas	Ш	Address (Giv	e oddress io w	hick approved	copy of this Jo	xm u 10 be se	ni)	
If well produces oil or liquids,					Rge.	is gas actually connected? Wh			a ?			
ive location of tanks.	<u> </u>	<u> </u>	1							<del></del>		
this production is commissed with the V. COMPLETION DATA	t from any of	her lease or	pool, gi	YE CC	ommingl	ing order num	ber:				<u></u>	
V. COMPLETION DATA		Oil Wel	1	Gas	Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	ı - (X)		i_			i	<u> </u>	i	i	<u>.                                    </u>	_i	
Date Spudded	Date Con	npl. Ready is	o Prod.			Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.) Name of Producing Formation						Top Oil/Cas	Top Oil/Gas Pay			Tubing Depth		
Perforations									Depth Casin	ig Shoe		
		TURNO	CASI	ING	AND	CEMENTI	NG RECO	RD.	<u>. !</u>	<del></del>	<del></del>	
HOLE SIZE CASING & TUBING SIZE						DEPTH SE		SACKS CEMENT				
	_											
- <u></u>							······································					
V. TEST DATA AND REQUI						<del></del>				<del></del>		
OIL WELL (Test must be after			e of load	l oil c	and mus		r exceed top al lethod (Flow, p			for full 24 hou	urs.)	
Date First New Oil Run To Tank	Date of 7	e K				Producing iv	realog (Flow, )	merφ, gas iyi,	<b>61</b> C./			
Length of Test	Tubing P	Tubing Pressure				Casing Press	<b>ELITE</b>		Choke Size	Choke Size		
•	_								Con MCG	Gas- MCF		
uctual Prod. During Test Oil - Bbls.					Water - Bbls.			Uair MCF				
GAS WELL						<u> </u>		·	<u>l</u>			
Actual Prod. Test - MCF/D	Length o	Test		-		Bbls. Conde	nsate/MMCF		Gravity of	Condensate		
										,		
Testing Method (pitot, back pr.)	Tubing 1	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
VI OPER A TOR CTOT	0.5	F 66:				-{ <b></b>						
VL OPERATOR CERTIFI				NC	E		OIL CO	NSERV	ATION	DIVISIO	NC	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above							OIL CONSERVATION DIVISION					
is true and complete to the best of m	y knowledge	and belief.				Dat	e Approv	ed NEC	16 190	8		
Rutal his	XI	V					• •					
Signature	<u> </u>					∥ Ву_		IAL SIGNE	BY JERRY	SEXTON		
<u>Butch Smith</u> <u>Vice President Operations</u>						DISTRICT I SUPERVISOR						
December 7, 1993	(918	) 585-	3121			Title	<b></b>	<del></del>		,		
Date			lephone	No.		11		•				

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.