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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

JUN 11 1966

Operator Ashmun & Hilliard			
Address 710 Vaughn Building, Midland, Texas 79701			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Request temporary off lease storage pending Formo / order	
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"/>		

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name J. E. Stokes, et al	Lease No. --	Well No. 1	Pool Name, including Formation Shoe Bar - Penn. R-3152	Kind of Lease State, Federal or Fee Fee
Location Unit Letter "G" ; 1980 Feet From The North Line and 2310 Feet From The East				
Line of Section 26 Township 16-S Range 85-E , NMPM, Lea County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipe Line (Sinclair-Purchaser)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) 725 Gulf Bldg., Midland, Texas	
If well produces oil or liquids, give location of tanks.	Unit "J" Sec. 26 Twp. 16 Rge. 35-E	Is gas actually connected? No When

If this production is commingled with that from any other lease or pool, give commingling order number:

No

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 2/24/66	Date Compl. Ready to Prod. 5/31/66	Total Depth 10,490'	P.B.T.D. --
Elevations (DF, RKB, RT, GR, etc.) 3964' GL	Name of Producing Formation Pennsylvanian	Top Oil/Gas Pay 10,478'	Tubing Depth 10,450'
Perforations 10,478-490' open hole			Depth Casing Shoe 10,478'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17"	11 3/4" csg	382'	500 sx
10 1/4"	8 5/8" csg	4828'	600 sx
7 7/8"	5 1/2" csg	10,478'	300 sx
	2" tubing	10,170' and 10,450'	

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)

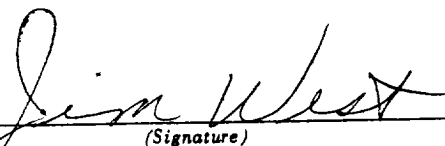
Date First New Oil Run To Tanks 4/18/66	Date of Test 4/18/66	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 400#	Casing Pressure Packer	Choke Size 16/64"
Actual Prod. During Test 24 hr test	Oil - Bbls. 175	Water - Bbls. 12 (7%)	Gas - MCF 308

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.



Production Superintendent

(Title)

June 10, 1966

(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.