

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-111  
Effective 1-1-65

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

Operator  
Petroleum Exploration & Development Funds, Inc.

Address  
P. O. Box 2412, Midland, Texas 79702

Reason(s) for filing (Check proper box)

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

Other (Please explain)

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.

CASINGHEAD GAS MUST NOT BE  
FLARED AFTER 4/1/77  
UNLESS AN EXCEPTION TO R-4070  
IS OBTAINED.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hudson-Federal	Well No. 1	Pool Name, Including Formation Baish Wolfcamp	Kind of Lease State, Federal or Fee Federal	Lease No. LC-054687
Location Unit Letter <u>O</u> ; <u>660</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>15</u> Township <u>17S</u> Range <u>32E</u> , NMPM, <u>Lea</u> 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"/> 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"/> Continental Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2197, Houston, Texas 77001			
If well produces oil or liquids, give location of tanks.	Unit O	Sec. 15	Twp. 17	Rge. 32
Is gas actually connected?		When Waiting on USBLM Right-of-Way approval		

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 Resrv. <input type="checkbox"/>	Diff. Resrv. <input type="checkbox"/>
Date Spudded 12-27-76	Date Compl. Ready to Prod. 4-21-77		Total Depth 11,652'		P.B.T.D. 10,830'			
Elevations (DF, RKB, RT, GR, etc.) 4034 RKB	Name of Producing Formation Baish Wolfcamp		Top Oil/Gas Pay 10,674'		Tubing Depth 10,570'			
Perforations 10,808-10,806-10,743-10,740-10,737-10,735-10,733-10,731-10,717-10,715-10,679-10,676-10,674					Depth Casing Shoe 11,652'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		462'		475 SX			
11"	8 5/8"		4650'		500 SX			
7 7/8"	4 1/2"		11,652'		775 SX			
	2 3/8"		10,570'					

VI. 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 3-18-77	Date of Test 5-15-77	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure 30 psi	Casing Pressure 30 psi	Choke Size 1"
Actual Prod. During Test 73	Oil-Bbls. 73	Water-Bbls. 0	Gas-MCF 33

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Ebls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VII. 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.

J. L. Litchfield  
(Signature)

Vice President

(Title)

May 17, 1977

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 26 1977, 19

BY [Signature]

TITLE SURVIVOR DISTRICT

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 district's 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 completed wells.

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

RECEIVED  
JUN 21 1977  
OIL CONSERVATION COMM.  
HOBBBS, N. M.