		1			
	NO. OF COPIES RECEIVED	4			
	DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMIL IN	Form C-104	
	SANTA FE	REQUEST	FOR ALLOWABLE	Superseder Old C-104 and	
	FILE	_	AND	Effective 121-65	
	J.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATUR	AL GAS	
	LAND OFFICE	_			
	TRANSPORTER GAS	<u> </u>			
	OPERATOR				
1.	PRORATION OFFICE				
	Operator HNG Oil Company				
	P. O. Box 2267, Midland, Texas 79702				
	Reason(s) for filing (Check proper bos	¢)	Other (Please explain)	
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry G	Gas		
	Change in Ownership	Casinghead Gas Conde	ensate		
	If change of ownership give name and address of previous owner				
Ħ.	DESCRIPTION OF WELL AND				
	Lease Name	Well No. Pool Name, Including	11-6/64	T C 3730	
	NM 34 State Com.	1 UND South Sho	e Bar Atoka 'State, F	Federal or Fee State LG-3728	
	Unit Letter F 19	80 Feet From The North Li	ine and 1980 Feet	From The West	
	24	wnship 16S Range 35	БЕ , _{имрм,}	Lea Count	
III.	Line of Section 34 To DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS	Count	
III.	Line of Section 34 To DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi	TER OF OIL AND NATURAL G.	AS Address (Give address to which	approved copy of this form is to be sent)	
III.	Line of Section 34 To DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi The Permian Corporati	TER OF OIL AND NATURAL G. or Condensate X	As Address (Give address to which P. O. Box 1183, House	approved copy of this form is to be sent) Ston, Texas 77001	
III.	Line of Section 34 To DESIGNATION OF TRANSPOR Name of Authorized Transporter of Of The Permian Corporati Name of Authorized Transporter of Ca	TER OF OIL AND NATURAL G. or Condensate X on singhead Gas or Dry Gas X	AS Address (Give address to which P. O. Box 1183, Hous Address (Give address to which	approved copy of this form is to be sent) ston, Texas 77001 approved copy of this form is to be sent)	
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VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

Actual Prod. Test-MCF/D

1700

Back Pressure

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.

(Title)

Length of Test

4370

24 hours

Tubing Pressure (Shut-in)

Bettys.	Sildon	Betty A. Gildon	
- Jen-	(Sig Regulatory Cle	nature) erk	

July 3, 1979 (Date) This form is to be filed in compliance with RULE 1104.

Goologist.

Bbls. Condensate/MMCF

Casing Pressure (Shut-in)

Packer

15 BOPD

APPROVED

TITLE!

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.

Gravity of Condensate

47.1

Choke Size

AUG 1 3 1979

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, rell name or number, or transporter, or other such change of condition. Canada Cama C. 104 mint he filed for each and in multiple