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	GAS	
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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

Operator J. M. Huber Corporation		
Address 1900 Wilco Bldg., Midland, Texas 79701		
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input type="checkbox"/>		Other (Please explain) Application for testing allowable for 683 bbls. for period Jan. - August, 1983. <i>February, 1984</i>
Change in Transporter of: Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/>		Dry 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 James O'Neill State Com	Well No. 2	Pool Name, Including Formation Morton Wolfcamp	Kind of Lease State, Federal or Fee	State	Lease No. LG-11138 LG-26823
Location Unit Letter C ; 600 Feet From The North Line and 1980 Feet From The West Line of Section 7 Township 15S Range 35E , NMPM, Lea County					

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Amoco Pipeline	Address (Give address to which approved copy of this form is to be sent) 302 E. Ave. A, Lovington, New Mexico 88260				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) Box 38, Tatum, New Mexico 88267				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 7	Twp. 15S	Rge. 35E	Is gas actually connected? When Yes September 16, 1983

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 10/26/82	Date Compl. Ready to Prod. 2/3/83		Total Depth 10,589'		P.B.T.D. 10,500'			
Elevations (DF, RKB, RT, GR, etc., RKB: 4062'	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 10,174'		Tubing Depth 10,420'			
Perforations 10,382'-386'; 402-406'; 410'-416'; 174'-176'; 179'-184'; 10,339'-340'; 343'-346'; 352'-353'; 376'-379'.					Depth Casing Shoe 10,589'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
14-3/4"	11-3/4"		397'		525'			
11	8-5/8"		4592'		2200'			
7-7/8"	5-1/2"		10,589'		1985'			

V. TEST DATA AND REQUEST FOR ALLOWABLE (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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble.	Water-Bble.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

R. M. Huber
(Signature)
District Production Manager
(Title)
January 30, 1984
(Date)

OIL CONSERVATION COMMISSION
FEB 2 1984
APPROVED _____, 19____
BY _____ ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
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.