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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-11
Effective 1-1-65

I.

Operator

J.M. Huber Corporation

Address

1900 Wilco Bldg., Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well [X]
Recompletion [ ]
Change in Ownership [ ]

Change in Transporter of:
Oil [ ]   Dry Gas [ ]
Casinghead Gas [ ]   Condensate [ ]

Other (Please explain)

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
James O'Neill St. Com.	2	Morton Wolfcamp	State, Federal or Fee State	LG-1138 LG-2682-3

Location

Unit Letter __C__ ; __660__ Feet From The __North__ Line and __1980__ Feet From The __West__

Line of Section __7__ Township __15S__ Range __35E__ , NMPM, __Lea__ County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]

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 [X] or Dry Gas [ ]

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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	7	15S	35E	Yes	September 16, 1983

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

IV. COMPLETION DATA

Designate Type of Completion — (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X							

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
10/26/82	2/3/83	10,589'	10,500'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
RKB: 4062'	Wolfcamp	10,174'	10,420'

Perforations 10,382'-386'; 402-406'; 410'-416'; 10,174'-176'; 179'-184';
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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
1/26/83	9/1/83	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	15	25	24

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. 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.

(Signature)

District Production Manager
(Title)

September 14, 1983
(Date)

OIL CONSERVATION COMMISSION

APPROVED **SEP 22 1983** , 19___

BY **ORIGINAL SIGNED BY EDDIE SEAY**

TITLE **OIL & GAS INSPECTOR**

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 multiple