

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Hondo Drilling Company	
Address P. O. Drawer 2516, Midland, Texas 79702-2516	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Condensate

ALLOWABLE
**CASINGHEAD GAS MUST NOT BE
FLARED AFTER 5-11-87
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED.**

THIS WELL HAS BEEN PLACED IN THE POOL
and address of previous owner listed below. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Barr "H" State	Well No. 1	Pool Name, including Formation North Sanmal-Penn	Kind of Lease State, Federal or Fee	Lease No. LG-6638
Location Unit Letter <u>I</u> : <u>1,930'</u> Feet From The <u>South</u> Line and <u>890'</u> Feet From The <u>East</u> Line of Section <u>7</u> Township <u>16-S</u> Range <u>33-E</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"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 159, Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> CONOCO, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1959, Midland, Texas 79702
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. I 7 16 33
Is gas actually connected?	When no Negotiating Contract

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)
President
(Title)
March 10, 1987
(Date)

OIL CONSERVATION DIVISION
MAR 12 1987
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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-5-87	Date Compl. Ready to Prod. 3-4-87	Total Depth 11,360'			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.), GR 4,238.3'	Name of Producing Formation Lower "Seaman"	Top Oil/Gas Pay 11,224'			Tubing Depth 11,216'				
Perforations 11,224 - 11,266						Depth Casing Shoe 11,360'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2"	13 3/8"		450'		400 sks cement cir.				
11"	8 5/8"		4,425'		1,700 sks cement cir.				
7 7/8"	5 1/2"		11,360'		600 sks				

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 3-4-87	Date of Test 3-7-87	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 235 lb.	Casing Pressure Packer	Choke Size 16/64
Actual Prod. During Test 136.8	Oil - Bbls. 136.8	Water - Bbls. no water	Gas - MCF 143

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