

OIL CONSERVATION DIVIS. N
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.U.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator
William E. Hendon, Jr.

Address
601 N. Loraine, Suite 111, Midland, Texas 79701

Reason(s) for filing (Check proper box) Other (Please explain)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<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
Union Oil Co. of California Shell Federal #1
Local office--300 N. Carrizo, Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name 35 Well No. 1 Pool Name, including Formation North Lusk Morrow Kind of Lease Federal Lease No. NMI4000

New Mexico Federal 35 State, Federal or Fee

Location
Unit Letter B ; 760 Feet From The north Line and 1980 Feet From The east

Line of Section 35 Township 18 S Range 32-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
P & O Falco	P. O. Box 108, Shreveport, LA 71161
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	P. O. Box 1492, El Paso, Texas
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
B 35 18-S 32-E	no waiting on pipeline

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res.
		XX	XX					
Date Spudded Aug. 25, 1981	Date Compl. Ready to Prod. October 14, 1981	Total Depth 13,702'	P.B.T.D. 13,651					
Elevations (DF, RKB, RT, GR, etc.) 3729 G.L.	Name of Producing Formation Morrow	Top Oil/Gas Pay 13,274	Tubing Depth 11,987					
Perforations 13,274 -- 13,612 :49' O.A. @ 2 JSPF			Depth Casing Shoe 13,651					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
11"	24#, 28# J-55 8 5/8"	4,571	Previously set--Unk.					
7 7/8"	17#, 20# N-80 5 1/2"	13,651	1200/sx Class H					
N/A	6.5# N-80 2 7/8"	pk. @ 11,987	N/A					

V. 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 4,318.220 CAOF	Length of Test 4 hrs.	Bbls. Condensate/MMCF 50.43	Gravity of Condensate 52.3 API
Testing Method (pilot, back pr.) 4 point back press.	Tubing Pressure (Shot-in) 5790 psig.	Casing Pressure (Shot-in) -0-	Choke Size varied

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 above is true and complete to the best of my knowledge and belief.

Timothy Hartsfield
(Signature)
Operations Engineer
(Title)
December 31, 1981
(Date)

OIL CONSERVATION DIVISION

MAR 9 1982

APPROVED _____, 19____
ORIGINAL SIGNED BY
BY JERRY SEXTON
TITLE DISTRICT 1 SUPR.

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