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U.S.G.S.		
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-110
Effective 1-1-65

I. Operator **Pennzoil United, Inc.**
Address **P. O. Drawer 1828 - Midland, Texas 79701**
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐
Other (Please explain) **THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE. R-3911**

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hudson "29" Federal	Well No. 3	Pool Name, including Formation Undesignated	Kind of Lease State, Federal or Fee Federal	Lease No. LC 069276
Location Unit Letter K ; 1980 Feet From The West Line and 1980 Feet From The South Line of Section 30 Township 18-S Range 33-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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119 - Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma	
If well produces oil or liquids, give location of tanks. Unit K Sec. 30 Twp. 18-S Rge. 33-E	Is gas actually connected? No	When Soon

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.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 6-27-69	Date Compl. Ready to Prod. 9-11-69	Total Depth 13,666'	P.B.T.D. 13,630'					
Elevations (DF, RKB, RT, GR, etc.) 3779 RKB	Name of Producing Formation Morrow	Top Oil/Gas Pay 13,101'	Tubing Depth 13,025'					
Perforations one hole @ 13,101, 104, 107, 113, 118, 121, 128, 137, 141, 145		Depth Casing Shoe 13,666'						
149, - 13,202, 205, 229, 232, 235, 277, 280, 284, & 287								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13 3/8"	394	360					
11"	8 5/8"	4,247	704					
7 7/8"	4 1/2"	13,666	675					

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 6,900	Length of Test 6 hrs	Bbls. Condensate/MMCF 43.3	Gravity of Condensate 54.2
Testing Method (pitot, back pr.) 4-point back pressure	Tubing Pressure (shut-in) 4398	Casing Pressure (shut-in) pk	Choke Size 12/64, 10/64, 8/64, 6/64

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.

Charles H. Brown
(Signature)
Manager of Drilling & Production
(Title)
September 25, 1969
(Date)

OIL CONSERVATION COMMISSION
APPROVED 8 1969, 19
BY [Signature]
TITLE [Signature]

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.