NO. OF COPIES REC	EIVED	i	
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FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective latess

	FILE AND Effective 1-1-65								55											
	U.S.G.S.		<u> </u>	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS																
	LAND OFFICE																			
	TRANSPORTER	OIL		4																
		GAS	<del>                                     </del>	4																
_	OPERATOR DESCRIPTION OF		<del>                                     </del>	-																
I. PRORATION OFFICE     Operator   Harding Qil & Gas Company																				
	Address	TT OT																		
	4317 Oak I	Lawn	Avent	ue. Dalla	as, Texas 75	219														
	Reason(s) for filing	(Check p	roper box	)			Other (Please	explain)	<del></del>											
	New Well	X		Change in	Transporter of:															
	Recompletion	Н		Oil	Dry G	as 📙	Re−e	ntry o	f Pubco well	,										
	Change in Ownership	P		Casinghea	d Gas Conde	nsate														
	If change of owners	thin give	e name																	
	and address of prev									<del></del>										
	DESCRIPTION O	-	T 4315		. 11. / 1	<b>(</b> `1														
11.	DESCRIPTION O	F WEL	L AND	Well No.	umble City Pool Name, Including F	- 27/C LU Formation	0 4300 1	(ind of Lease	· · · · · · · · · · · · · · · · · · ·	Lease No.										
	Shipp			1 1	Wildcat (St		, , , ,	state, Federal	lor Fee FEE	25000 1101										
	Location	<del></del>			MITUCAL (DC		, L	· · · · · · · · · · · · · · · · · · ·	PED	-l <u></u>										
	Unit Letter K		. 231	O Feet From	The South Lin	and 208	0	Foot From T	he_West											
	Omit Better		' <del></del>	1 660 1 1011	, ineEn	ile dilu <u></u>	<del></del>	reet stom i	ne Webe											
	Line of Section	11	∵ov	mship 17	S Range	37E	, NMPM,	Lea		County										
III.					AND NATURAL GA															
	Name of Authorized	-		<del></del>	ndensate [	Address (C	live address to	which approv	ed copy of this form is t	o be sent)										
	The Permia				Day 6 F-	P.O. Box 1183, Houst			ton, Texas 77001  ved copy of this form is to be sent)											
	Name of Authorized	1 tonspor	ter or Cas	ingnead Gas	or Dry Gas	Address	ive aggress to	wnich approv	ea copy of this form is t	o be sent;										
				Unit Sec.	Twp. F.ge.	Te age get	ally connected	? Whe	n											
	If well produces oil of give location of tank		5,	K 11	1 1	is gas acti	idily connected	r ine	n											
	L <u> </u>			L	17S   37E					·										
	· •		ngled wit	h that from any	other lease or pool,	give commi	ingling order n	umber:	· · · · · · · · · · · · · · · · · · ·											
14.	COMPLETION DA	AIA		011	l Well Gas Well	New Well	Workover	Deepen	Plug Back   Same Res	'v. Diff. Res'v.										
	Designate Typ	e of Co	ompletio	n = (X)	x :	-		37		1										
	Date Spudded			Date Compl. Re		Total Dept	h		P.B.T.D.											
	1/24/72			3/91/7	2	11.6	82'		11,550'											
	Elevations (DF, RKB	B, RT, G	R, etc.j	Name of Produc	ing Formation	Top Oil/G	as Pay		Tubing Depth											
	GL. 3749'		Strawn			11,400		11,325												
	Perforations							05 1	Depth Casing Shoe											
	11,429 to 11,452' (35 holes)								11,681'											
					JBING, CASING, AND	CEMENT														
٠.	HOLE:	SIZE	<u>.                                    </u>	/ 1/2	& TUBING SIZE	1 1 1	CO1	·	SACKS CEMENT											
	7 7/8"					11,681			640 sacks											
	$\frac{1}{12} \frac{1}{1} \frac{1}{4} 1$			13 3/8 -9 5/8	311	· · · · · · · · · · · · · · · · · · ·	_43 <u>4</u> 7.67.'		400 sacks											
	12 1/4		<del></del>	2 3/8			7.97 325	····	1100 sacks											
T.	MEGM DAMA AND	DEOL	IDOM E	!		,	· •													
	TEST DATA AND OIL WELL	KEQU	EST FU	JR ALLOWAB	able for this de	ster recovery opth or be for	of total volume full 24 hours)	of toad oil a	nd must be equal to or e	xceed top allow-										
i	Date First New Oil R	dun To T	ank =	Date of Test			Method (Flow,	oump, gas lift	, etc.)											
	3/10/72			3/11/72	3/11/72		Pumping													
Ì			Tubing Pressure		Casing Pressure		Choke Size													
	24 hr.			1600/	<i>‡</i>				10/64"											
			Oil-Bbla.		Water - Bbls.			Gas-MCF												
Į.	286 bbls	•		286		Trac	e		286											
	<u> </u>																			
Г	GAS WELL Actual Prod. Test-M	(CE/D		Length of Test		Bhle Cond	ensate/MMCF		Gravity of Condensate											
İ		icr/D		Length of 100t		Bara. Con	and are land of		Gravity of Concentagle											
}	Testing Method (pito	t. back p	)F. )	Tubing Pressure	(Shut-in)	Cosing Pre	ssure (Shut-i	a )	Choke Size											
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				(0000 00)			•												
VI	CERTIFICATE O	E COM	DITANC				OIL CO	NSEDVA	TION COMMISSION											
¥ 2.	CERTIFICATE O	r COM	FLIANC	·E				15.33	TION COMMISSION	•										
	I heraby cartify that	t the cul	es and re	oulstions of th	e Oil Conservation	APPROVED , 19														
	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)					TITLE SUPERVISOR DISTRICT I  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															
										Agent					tests taken on the well in accordance with MULE 111.					
										(Tule) March 20, 1972					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.					
																				(Date)
																				Separate Forms C-104 must be filed for each pool in multiply completed wells.
						" - combrace														

## RECEIVED

MAR 2 2 1972 OIL CONSERVATION COMM. HOBBS, N. M.