-+	THE PROPERTY OF CAPIFE PECKINED					
	DISTRIBUTION 5ANTA FC		DESCRIVATION COMMISSIO :	Poim C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRAI	- AND HSPORT OIL AND HATURAL C	GAS		
	LAND OFFICE		-			
	TRANSPORTER GAS					
	OPERATOR PRORATION OFFICE Operator					
	Danas Danas	Anna Danniation Company				
	P.O. DRAWER H	LEVELLAND, TEX	AS 79336 Other (Please explain)			
	Reason(s) for filing (Check proper box)	CHANGE LEASE AND WELL NAME FROM				
	Recompletion	Oil Dry Gas Casinghead Gas Condens		TO SOUTH HOBBS UNIT#114		
	Change in Ownership	Caamqueda Gus contain		<u></u>		
	If change of ownership give name and address of previous owner		· · · · · · · · · · · · · · · · · · ·			
I.	DESCRIPTION OF WELL AND I	FASE Well No. Pool Name, Including Fo	ormation Kind of Leas	e Lease No.		
	SOUTH HOBBS, UNIT	114 HOBBS GRAYBU		lorFee FEE		
	Location	O Feet From The SOUTH Line	and 1650 Feet From	The <u>EAST</u>		
				EA County		
	End of decision					
I.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)					
	SHELL PIPELINE CO. Name of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent)			
	Name of Authorized Hunsporter of Osserigina		BARTLESVILLE, OKLAHOMA Is gas cetually connected? When			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. J 6 19 38	Is gas cetually connected?			
	If this production is commingled wit			,		
7.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Daspen	Plug Back Same Resty, Diff. Resty.		
	Designate Type of Completio	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth		
				Depth Casing Shoe		
	Perforations					
	HOLE SIZE	TUBING, CASING, AND	DEPTH SET	SACKS CEMENT		
	HOLE SIZE					
	THE SPONSE DA	OD AT TOWART E Test must be at	fer recovery of total volume of load oil	and must be equal to or exceed top allow-		
₹.	TEST DATA AND REQUEST FOOL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas li			
	Date First New Oil Run To Tanks	Date of 1681		Choke Size		
	Length of Test	Tubing Pressure	Casing Pressure			
	Actual Prod. During Tost	Oil-Bble.	Water-Bbis.	Gae - MOF		
	GAS WELL					
	Actual Fred, Test-MCF/D	Length of Test	Bbls. Condensote/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Processe (Shuu-in)	Casing Pressure (Shut-in)	Chake Size		
1.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION			
	and regulations of the Oil Conservation		APPROVED	. 19		
		with and that the information given best of my knowledge and belief.	BY			
BUOLE 18 HAS KING COMPLETE AT THE STATE OF T		TITLE3				
	.1 , 2		This form is to be filed in	compliance with MULE 1104,		
	Kenneth Bra	ud	If this is a request for allo	enied by a tubulation of the deviation		

well, this form must be accompenied by a facilities to tests taken on the well in accordance with BULE 111.

All sections of this form must be filled out completely for allow-ship on now and to empleted vialis.

Fill out only Sections I, II, III, and VI for elstopes of owner, well name or number, or transporter of other such change of condition.

NO. OF COPIES REC	1		
DISTRIBUTE			
ANTAFE]		
ILE			
.4.5.6.5.			
. AND OFFICE			
TRANSPORTER	OIL		
THANSPORTER	GAS		
PERATOR			
PROHATION OFFICE			

W MEXICO OIL CONSERVATION COMMISSIO. REQUEST FOR ALLOWABLE

Porm C-104 Supersedes Old C-104 and C-110 Effective 1-1-07

ILE	1	AND	THective [-1-65		
.:.S.G.S.	AUTHORIZATION TO TRA	NNSPORT OIL AND NATURAL	GAS		
. AND OFFICE	4				
TRANSPORTER GAS	-				
PRONATION OFFICE	-{				
perator					
AMOCO PRODUCTION	COMPANY				
P.O. Drawer A, Leteration (Check proper box		Other (Please explain)			
ew Well	Change in Transporter of:	Other It was explain,			
necompletton	Oil Dry Go	" Change Lease N	ame From O.O. Bradley "B"		
nange in Ownership	Casinghead Gas Conder				
change of ownership give name					
ESCRIPTION OF WELL AND	LEASE				
rase Name	Well No. Pool Name, Including F	1			
radley "B"	1 Hobbs Grayburg	San Andres I state, reac	Fee Fee		
Unit Letter;;;	310 Feet From The South Lin	e and 1650 Feet From	The East		
Line of Section 6 Tox	waship 19-S Range	38-E , NMPM,	Lea County		
ESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s .			
.ame of Authorized Transporter of Off	or Condensate		oved copy of this form is to be sent)		
Shell Pipeline Co.	singhead Gas [X] or Dry Gas [800 Wilco Bldg. Midland, Texas 79701 Address (Give address to which approved copy of this form is to be sent)			
hillips Petroleum Co.		Bartlesville, Oklahoma			
: well produces oil or liquida, ive location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected? When Yes July 14, 1954			
this production is commingled with DMPLETION DATA	th that from any other lease or pool,				
Designate Type of Completic	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Resty, With Resty,		
ate Spuddod	Date Compl. Ready to Pred.	Total Derth	P.B.T.D.		
.evations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth		
erforations	<u> </u>		Depth Casing Shoe		
	TUBING, CASING, AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
TST DATA AND REQUEST FO			l and must be equal to or exceed top allow-		
I. WELL cte First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etc.)		
STE A HEL MAN OIL UNIT LO LAWA					
ength of Test	Tubing Pressure	Casing Pressure	Choke Size		
.stual Prod. During Test	OH-Bbis.	Water - Bb.s.	Gas-MCF		
'C PPI I					
AS WELL cital Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
		Corton Description (Charter (n.)	Chcke Size		
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)			
ERTIFICATE OF COMPLIANC	CE	OIL CONSERV	ATION COMMISSION		
nereby certify that the rules and r	egulations of the Oil Conservation	APPROVED	, 19		
emmission have been complied with and that the information given ove is true and complete to the best of my knowledge and belief.		BYOde.	Signal to		
		TITLEJohn	Kis		
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	compliance with RULE 1104.		
L.	1 1 1	Tute form in to be tried in	. Congression from the man in 1976		

Administrative Assistant
(Title)
/-2/-77
(Date)

H-000MF

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If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the coviation tests taken on the well in accordance with MULE 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.

Oli Constitute W. W. W.

NO. OF COPIES RECEIVED			
DISTRIBUTION			
SANTA FE			
FILE			
U.\$.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE	REQUEST F	ONSERVATION COMMISSIC FOR ALLOWABLE AND NSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 AS	
ı.	TRANSPORTER GAS OPERATOR PRORATION OFFICE Operator				
	AMOCO PRODUCTION COMPANY				
	P.O. DRAWER A, LEVELLAND, 1	TEXAS 79336			
	Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)	ership from W.K. ByRom	
	New Well Recompletion Change in Cwnership	Oil Dry Gas Casinghead Gas Condens		ļ	
	If change of ownership give name and address of previous owner	W. K. BYROM BOX	147 HOBBS, N.M.	88240	
11.	DESCRIPTION OF WELL AND I	DESCRIPTION OF WELL AND LEASE Lease Name Well No., Pool Name, Including Formation Kind of Lease Lease No.			
	O.O. BRADLEY "B"	1 HOBBS GRAYBUR			
		D Feet From The SOUTH Line	and 1650 Feet From 1	The EAST LEA County	
	DESCRIPTION OF TRANSPORT	VED OF OH AND NATURAL GA	e e		
il.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to which approv		
	SHELL PIPELINE CO	inghead Gas 🔀 or Dry Gas	800 WILCO BLDG. MI Address (Give address to which approv	DLAND EX 79701 wed copy of this form is to be sent)	
	PHILLIPS PETROLEUM	Ca	BARTLES VILLE OKA	LAHOMA	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	July 14, 1954	
ïV.	If this production is commingled wit COMPLETION DATA		give commingling order number: New Well Workover Deepen	Flug Back Same Resty, Diff. Resty,	
	Designate Type of Completio		New West Hotkover Beepen		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top O:1/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND		CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be af	fter recovery of total volume of load oil	and must be equal to or exceed top allow-	
	OII. WEIL able for this depth or be for full 24 hours) Date of Test Producing Method (Flow, pump, gas lift, etc.)				
		Tubing Pressure	Casing Pressure	Choke Size	
	Length of Test	I doing Fleebule			
	Actual Pred. During Test	Oil - Bbls.	Water-Bbls.	Gan-MCF	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
· VI	CERTIFICATE OF COMPLIAN	CE		ATION COMMISSION	
	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.		APPROVED	, 19	
			BY		
			TITLE		
	fam in Car		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
	Kay W. Cox Administrative Assistant		well, this form must be accompa	inted by a tabulation of the deviation or the deviation or the deviation of the deviation o	
			All sections of this form musble on new and recompleted w	ust be filled out completely for allow-	
•	4 - NMoCC-H (Title) 1- Div. 12-30-76		Fill out only Sections I I	II. III, and VI for changes of owner, ter, or other such change of condition.	
	1- Sust.	ne)	Separate Forms C-104 mus	at be filed for each pool in multiply	

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.

NO. OF COPIES RECEIVED	-				
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-134		
SANTA FE	RECHEST	T FOR ALLOWARIE	Supersedes Old C-104 and C-116 Effective 1-1-65		
FILE		AND RANSPORT OIL AND NATUR	h 12 s 12		
LAND OFFICE	AUTHORIZATION TO TH	RANSPORT OIL AND NATUR	HE 1945/2 34 PM ann		
01L	······································		177 63		
TRANSPORTER GAS					
OPERATOR					
I. PRORATION OFFICE					
Cierator W. K. By	rom				
Address Poy 117	- Hobbs, N. M.				
DOX 141	- 1100005 No 114				
Reason(s) for filing (Check p		Other (Please explain)			
Mew Well	Change in Transporter of:	G			
Theompletion Thange in Ownership	Ci. Dry Casinghead Gas X	densate	Commission		
nande ii. Switership	Sabingina da A	necues cea by	JOHEN ESSECTI		
If change of ownership give					
and address of previous ow	ilei				
II. DESCRIPTION OF WEL	L AND LEASE	Name, Including Formation	Kind of Lease		
Lease Name			State, Federal or Fee		
O. O. Brad	Tey B T Hopp	s San Andres Grayburg	ree		
	; 2310 Feet From The South L	ing and 1650 Feet F	rom The		
Unit Letter	reet From The Notes	The did			
Line of Section 6	, Township 198 Range	38E , NMPM,	Lea County		
<u></u>					
III. DESIGNATION OF TRA	NSPORTER OF OIL AND NATURAL O	GAS Address (Give address to which a	pproved copy of this form is to be sent)		
Name of Authorized Transpor			FF		
Name of Authorized Transpor	ter of Casinghead Gas or Dry Gas	Address (Give address to which a	pproved copy of this form is to be sent)		
	•	Partleguille Oklah	oma		
Phillips Petroleu If well produces oil or liquid	'list Sec. Two. Hge.	Bartlesville Oklaho Is gas actually connected?	When		
give location of tanks.	J 6 198 38E	Yes	July 14, 1954		
If this production is commi	ngled with that from any other lease or poo	ol, give commingling order number:			
IV. COMPLETION DATA	Cil Well Gas Well				
Designate Type of C					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Sale opudasa	,				
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
			Deal Carina Char		
Perforations	Perforations Depth Casing Shoe				
	TURING CASING A	ND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
11022 3122					
	UEST FOR ALLOWABLE (Test must be able for this	e after recovery of total volume of load depth or be for full 24 hours)	l oil and must be equal to or exceed top allow-		
OIL WELL Date First New Cil Run To		Producing Method (Flow, pump, g.	as lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
			2 1/05		
Actual Frod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF		
CAS WELL	GAS WELL				
Actual From Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
resting Method (pitot, back	pr.) Tubing Pressure	Casing Pressure	Choke Size		
VI. CERTIFICATE OF COM	CERTIFICATE OF COMPLIANCE		RVATION COMMISSION		
			, 19		
Commission have been co	ales and regulations of the Oil Conservation mplied with and that the information give	en /			
above is true and comple	te to the best of my knowledge and belie	f. BY			
		TITLE			
	R.R. anderson				
$\rho \rho \wedge \Lambda$			in compliance with RULE 1104. allowable for a newly drilled or deepened		
	(Signature)	wel this form must be acco	ompanied by a tabulation of the deviation		
R. R. Anderson		tests taken on the well in a	accordance with RULE 111.		
Office Mgr.	(Title)	able on new and recomplete			
7-9-65	·····	Fill out Sections I. II.	III, and VI only for changes of owner,		
(-7-07	(Date)		sporter, or other such change of condition. must be filed for each pool in multiply		
		Separate Forms C-104 completed wells.	must be fried for each poor in multiply		