

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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-
Effective 1-1-65

I. Operator
Doyle Hartman
Address
P. O. Box 10426, Midland, Texas 79702
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name Byrom-Williams Well No. 1 Pool Name, including Formation Eumont (Queen) Kind of Lease State, Federal or Fee Fee
Location
Unit Letter G : 1650 Feet From The North Line and 2310 Feet From The East
Line of Section 33 Township 19S Range 37E, NMPL, Lea County

III. 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)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas P. O. Box 1384 Jal, New Mexico 88252
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
No July 1982

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'
Date Spudded 6-14-82 Date Compl. Ready to Prod. 6-29-82 Total Depth 3900 P.B.T.D. 3896
Elevations (DF, RAB, RT, GR, etc.) 3570.9 GL Name of Producing Formation Queen Top Oil/Gas Pay 3579 Tubing Depth 3741
Perforations 3579-3700 w/18 Shots (Queen) Depth Casing Shoe 3900
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12 1/4 9 5/8" 36.0 lb/ft 426' 225 (circ)
8 3/4 7" 23.0 lb/ft 3900' 1100 (circ)

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 all able 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 192 Length of Test 24 Hours Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (pilot, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choke Size
Orifice Tester FCP = 100 psi 17/64

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.
Larry A. Murray
Engineer
July 6, 1982
OIL CONSERVATION COMMISSION
APPROVED AUG 11 1982
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT SUPERVISOR
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 deviated 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.