

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 08-01-83
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| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Hobbs Production Company
Address
P. O. Box 4072, Odessa, TX 79760
Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership
Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)
Request for allowable

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------|----------------------------------------------|-----------|
| Lease Name South Hobbs (GSA) Unit | Well No. 221 | Pool Name, including Formation Hobbs GSA | Kind of Lease State, Federal or Fee State | Lease No. |
| Location SL/BHL Unit Letter C/B : 1091/490 Feet From The north Line and 2411/2580 Feet From The west/east Line of Section 4 Township 19-S Range 38-E, NMPM, Lea County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|----------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1008, Hobbs, NM 88240 | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company GPM Gas Corporation | Address (Give address to which approved copy of this form is to be sent) 4001 Benbrook, Odessa, TX 79761 | |
| If well produces oil or liquids, give location of tanks. Unit D 34 18-S 38-E | Is gas actually connected? Yes | When 8-6-87 |

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

NOTE: Complete Parts IV and V on reverse side if necessary.

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


(Signature)

Sr. Administrative Analyst

8-13-87

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 2 1987, 19

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT I 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 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.

IV. COMPLETION DATA

| | | | | | | | | | |
|--------------------------------------------------|-------------------------------------------|---------------|-------------------------|---------------|----------------------|---------------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | | Oil Well X | Gas Well | New Well X | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 6-3-87 | Date Compl. Ready to Prod. 8-6-87 | | Total Depth 4404 | | P.B.T.D. 4380 | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3610.6' GL | Name of Producing Formation San Andres | | Top Oil/Gas Pay 4070 | | Tubing Depth 4050 | | | | |
| Perforations 4070 to 4106 | | | | | | Depth Casing Shoe 4404 | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | | |
| 26 | 16 | | 40 | | 3 1/2 yds. red1-mix | | | | |
| 14 3/4 | 10 3/4 | | 1534 | | 1000 Sx | | | | |
| 9 7/8 | 7 | | 4404 | | 1400 Sx | | | | |

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 8-6-87 | Date of Test 8-5-87 | Producing Method (Flow, pump, gas lift, etc.) ESP | |
| Length of Test 24 hours | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. 150 | Water - Bbls. 4850 | Gas - MCF N/A |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

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