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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 N. B. Hunt	
Address Drawer 1350 Midland, Texas 79701	
Reason(s) for filing (Check proper box.)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

**GAS MISTHEAD GAS MUST NOT BE
STARTED
UNLESS AN EXCEPTION TO R-104
IS OBTAINED.**

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Weatherly	Lease No. 2	Well No. 2	Pool Name, including Formation Penrose Skelly - Grayburg	Kind of Lease State, Federal or Fee Fee
Location				
Unit Letter D	660	Feet From The North	Line and 660	Feet From The West
Line of Section 21	Township 21-S	Range 37 - 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"/> Texas - New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 1510 Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) Box 1135 Eunice, New Mexico 88231	
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 21
	Twp. 21-S	Rge. 37-E
	Is gas actually connected? yes	
	When -	

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v.	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded 5-7-47	Date Compl. Ready to Prod. -		Total Depth 6629		P.B.T.D. 3803			
Elevations (DF, RKB, RT, GR, etc.) 3463 DF	Name of Producing Formation Grayburg		Top Oil/Gas Pay 3738		Tubing Depth 3732			
Perforations 3738 - 3790 Selectively						Depth Casing Shoe 6629		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2	12 1/2		280		250			
11	8 5/8		2890		1200			
7 7/8	5 1/2		6629		500			
	2 3/8		3732					

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 May 23, 1971	Date of Test June 7/8, 1971	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hours	Tubing Pressure 50	Casing Pressure 50	Choke Size --
Actual Prod. During Test	Oil - Bbls. 49 1/2	Water - Bbls. 8 3/4	Gas - MCF 238

GAS WELL

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

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.

Ray L. Rutledge
(Signature)
District Engineer
(Title)
June 14, 1971
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUN 16 1971**, 19
BY **Leslie M. Clements**
TITLE **OIL & GAS INSPECTOR**

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.

10/10/71

10/10/71

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JUN 15 1971

OIL CONSERVATION COMM.
HOBBS, N. M.