

DEPARTMENT OF LAND & MINES FILE M.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-101 and C-111 Effective 1-1-65
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Operator N. B. Hunt	
Address 1021 Western United Life Bldg.; Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐
Operator change of address	
If change of ownership give name and address of previous owner	

DESCRIPTION OF WELL AND LEASE				
Lease Name Weatherly	Well No. 1-4	Pool Name, including Formation Tubbs-Drinkard Pool	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter G ; 2090 Feet From The North Line and 1980 Feet From The East				
Line of Section 21 Township 21-S Range 37-E , NMPM, Lea County				

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)			
Texas-New Mexico Pipe Line Company	Box 1510; Midland, Texas 79701			
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 Company	P. O. Box 1384; Jal, New Mexico 88252			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 21	Twp. 21-S	Pge. 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:				

COMPLETION DATA								
Designate Type of Completion -- (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
		X					X	
Date Spudded 10-31-48	Date Compl. Ready to Prod. 2-2-49		Total Depth 8365'		P.B.T.D. 6183'			
Elevations (DF, RKB, RT, GR, etc.) DF 3462	Name of Producing Formation Tubbs-Drinkard		Top Oil/Gas Pay 6160'		Tubing Depth 6130'			
Perforations 6163-6183'					Depth Casing Shoe 6190'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17"	13-3/8"		350'		300			
11"	8-5/8"		2800'		1500			
7-7/8"	5-1/2"		6190		350			

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	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	Length of Test	Lbs. Condensate/MMCF	Gravity of Condensate
784.4	24 hrs.	1000	67°
Testing Method (flow, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back Pressure	280#	500#	12/64"

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION 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____
Robert W. Dodd (Signature) Division Engineer (Title) July 19, 1977 (Date)	BY _____ TITLE _____ 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 portions of this form must be filled out completely for allowable on new and recompleted wells. Fill out only portions I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.