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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  
CAMPBELL & HEDRICK

Address  
P.O. BOX 401 - MIDLAND, TEXAS 79702

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	GET ALLOWABLE FOR TEST OIL PRODUCED
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	9-6-81 -- 7-26-82
		Dry Gas	<input type="checkbox"/>	TOTAL 248 BBLs. (EST.)
		Condensate	<input type="checkbox"/>	

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name A.M. LOCKHART	Well No. 3	Pool Name, Including Formation SAN ANDRES GAS (WILDCAT)	Kind of Lease State, Federal or Fee	Lease No. LC032096(a)
Location Unit - Meter M ; 990 Feet From The SOUTH Line and 990 Feet From The WEST Line of Section 17 Township 21S. Range 37E. , NMPM, LEA CO., NEW MEXICO 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 PIPE LINE CO.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 2528 - HOBBS, NEW MEXICO 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> GETTY OIL COMPANY	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 3000 - TULSA, OKLAHOMA 74102					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 17	Twp 21S.	Rge. 37E.	Is gas actually connected? YES	When PLANT WAS BUILT

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'v.
		X	X					
Date Spudded 12-4-80	Date Compl. Ready to Prod. 9-6-81		Total Depth 4202'			P.B.T.D. 4170'		
Elevations (DF, RKB, RT, GR, etc.) 3491 GR. (EST.)	Name of Producing Formation SAN ANDRES		Top Oil/Gas Pay 4017'			Tubing Depth 3950'		
Perforations 4017-92						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	310'-8 5/8" CSG.		310'		200 SX. CLASS "C"			
7 7/8"	4202'-5 1/2" CSG.		4202'		1000 SX.			
2 3/8"	2 3/8" TUBING		3950'					

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 9-6-81	Date of Test 6-22-82	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 24 HRS.	Tubing Pressure 25#	Casing Pressure 35#	Choke Size 2"
Actual Prod. During Test	Oil-Bbls. TRACE	Water-Bbls. 60 BBLs.	Gas-MCF 133

GAS WELL

Actual Prod. Test-MCF/D 133	Length of Test 24 HRS.	Bbls. Condensate/MMCF TRACE	Gravity of Condensate 29° (EST.)
Testing Method (pilot, back pr.) ORIFICE METER	Tubing Pressure (Shut-in) 950 #/SG. IN.	Casing Pressure (Shut-in) 950#/SG. IN.	Choke Size 2"

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.

(Signature)  
PARTNER & PET. ENGR.

(Title)  
7-28-82

(Date)

OIL CONSERVATION COMMISSION  
APPROVED AUG 2 - 1982, 19  
BY ORIGINAL SIGNED BY  
JERRY SEXTON  
TITLE DISTRICT 1 SUPR.

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.

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