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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PROBATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-101
Supersedes Old O-101 and O-111
Effective 1-1-65

Operator Minerals, Inc.	
Address P.O. Box 1320 Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Hodges Federal	Well No. 1	Pool Name, including Formation Sandhills Grayburg-San Andres	Kind of Lease State, Federal or Free Federal	Lease No. NM-17814
Location				
Unit Letter P	330	Feet From The South	Line and 330	Feet From The East
Line of Section 31	Township 20 South	Range 39 East	N.M.P.M. Lea	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Southern Union Transporting Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 980 Hobbs, New Mexico 88240					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ 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 P	Sec. 31	Twp. 20S	Rge. 39E	Is gas actually connected? No	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 Well as Prod. Record ☐
Date Spudded 4-29-82	Date Compl. ready to Prod. 6-2-82	Total Depth 4385'	P.B.T.D. 4365'				
Directions (DF, Rnd, RT, CR, etc.) 3562' GL	Name of Producing Formation San Andres	Per. Oil/Gas Pay 4342'	Testing Depth 4360'				
Perforations 4342' - 4358' w/4 JSPF	Depth Casing Shoe 4385						

HOLES, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8" OD	1647'	856 sx
7-7/8"	5-1/2" OD	4385'	450 sx

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 test allowable for this well or be for full 24 hours)

Date First New Oil Run To Tanks 6-10-82	Date of Test 7-10-82	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure -	Casing Pressure Open	Choke Size -
Actual Prod. During Test -	Oil-Bbls. 35	Water-Bbls. 79	Gas-MCF 15 (est.)

GAS WELL

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

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.

Minerals, Inc.

OK Klear
(Signature)

Vice-President Engineering

7-13-82
(Date)

OIL CONSERVATION COMMISSION

APPROVED: JUL 16 1982, 19
ORIGINAL SIGNED BY
BY: JERRY CEXTON
TITLE: DISTRICT SUPER.

This form is to be filed in compliance with RULE 1101.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the production tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely and there shall be no omissions or omissions.

Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter; or other such change of record.

LOCATION Section 31, T20S, R29E
(Give Unit, Section, Township and Range)

OPERATOR Minerals, Inc.

DRILLING CONTRACTOR VISION DRILLING, INC.

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above described well and that he has conducted deviation tests and obtained the following results:

[illegible]

Drilling Contractor VISION DRILLING, INC.

By:

Subscribed and sworn to before me this 10 day of January, 1940.

Notary Public

My Commission Expires: _____ County _____