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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I		OTRA	<u>NSP</u>	ORT OIL	ANU NA I	UHAL GA	Well A	PI No.			
Operator Hawkins Oil & Gas, Inc.						30-025-10088					
Address		·									
Address 400 S Boston, Suite 800) Tuls	sa, Ok	74	103							
Reason(s) for Filing (Check proper box)					Othe	r (Please expla	in)				
New Well		Change in	_								
Recompletion	Oil	_	Dry G				•				
Change in Operator X	Casinghead	d Gas	Conde			ve 9-1-8		 			
f change of operator give name and address of previous operator Presi			ion,	Inc. 3	3131 Tur	tle Cree	k Blýd.	Suite 4	00 Dall 75219-54	15 TX	
I. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including					g Formation		Kind	of Lease	Le	Lease No.	
Lease Name Mattern	Aanda a d								,		
Location											
Unit Letter M	.:	330	. Feet I	From The	South Line	and3	30 F	eet From The	West	Line	
Section 7 Township	22	S	Range	<u>37E</u>	, NI	ирм,	·····		Lea	County	
III. DESIGNATION OF TRANS	SPORTE	R OF O	IL A	ND NATU	RAL GAS	e address to wi	hick approve	i copy of this f	orm is to be se	nt)	
Name of Authorized Transporter of Oil TA Approved 12/75		or Conder	15216								
Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent)										
TA Approved 12/75 If well produces oil or liquids,	ell produces oil or liquids, Unit Sec. Twp. Rge.					y connected?	When	n ?			
give location of tanks.	М	7	228								
If this production is commingled with that i	from any oth	ner lease or	pool, s	give comming!	ing order num	ber:					
IV. COMPLETION DATA		0:37		Gas Well	New Well	Workover	Deepen	Plug Rack	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	Oil Well	' 	OSP Mell	I THEM METT	,			<u></u>	<u></u>	
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Der	Tubing Depth		
Perforations					L			Depth Casi	ng Shoe		
					CEMENTI	NG RECOR			210/2 051		
HOLE SIZE	CA	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
											
	ļ										
V. TEST DATA AND REQUES	T FOR	ALLOW	ABL	E	I						
OIL WELL (Test must be after r	ecovery of t	otal volume	of loa	d oil and must	be equal to o	r exceed top al	lowable for ti	his depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of To				Producing M	lethod (Flow, p	ump, gas lift,	eic.)			
	matt. D				Casing Dress	iine		Choke Size	Choke Size		
Length of Test	Tubing Pr	Tubing Pressure				Casing Pressure					
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF	Gas- MCF		
Secret 110m Paring 100	J.1 - 1018										
GAS WELL									<u> </u>		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of	Gravity of Condensate		
					Contra Description (Chart in)			Choke Size			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			CHOICE SEC			
VI. OPERATOR CERTIFIC	ATE O	F COM	PLL/	ANCE		OIL CO	NCED!	/ATION	חואופוע	NC	
I hereby certify that the rules and regul	lations of th	e Oil Conse	ervatio	1			ואסבעו				
Division have been complied with and	that the inf	ormation gi	ven ab	ove		_		O(CT 3	1989	
is true and complete to the best of my HAWKINS QIL & GAS; IN	C.	and Delici.			Date	e Approvi	ed			 	
Philip will					1	Orig. Signed by Paul Kautz					
	_				∥ By_			Geold			
<u>Philip J. Wilner - Vi</u>	<u>ce Pre</u>	sident	-Gas	Mrktg.				•	- '		
Printed Name September 18, 1989	(918) 5	85-3	3121	Title)					
Date	•		lephon		1						
_ 			-								

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.