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Appropriate District Office
DISTRICT I
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## 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., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

[. <u> </u>	<u> </u>	OTRA	NSF	PORT OIL	AND NA	TURAL GA	<u>.S</u>	DI No		<del></del> 1	
Operator Hawkins Oil & Gas, Inc.						Well API No. 30-025-101					
Address 400 S. Boston, Su	ite 800		ulsa	a, OK 7	4103						
Reason(s) for Filing (Check proper box)  New Well  Recompletion  Change in Operator		Change in	Trans Dry (	porter of:	Other	x (Please expla	ept l,				
of change of operator give name and address of previous operator	esidio	Explo:	rat	ion, Inc	. 3131	Turtle C	reek'Bl	vd, Suit	e 400	Dallas, T 75219-5	
IL DESCRIPTION OF WELL	AND LEA	SE	,				1 1	( Lease	1	ease No.	
Lease Name Penrose Well No.   Pool Name, Includin   Paddock						ng Formation Ki			1	LC061446	
Location Unit LetterE	Letter E : 2086 Feet From The No.					orth Line and 776 Fee			t From The West Line		
Section 9 Township	225	3	Rang	ge <u>37E</u>	, N	ирм,	Lea			County	
III. DESIGNATION OF TRANS	SPORTEI	R OF O	IL A	ND NATU	RAL GAS						
Name of Authorized Transporter of Oil X or Condensate						Address (Give address to which approved copy of this form is to be sent)					
Shell Pipeline Corporation  Name of Authorized Transporter of Casinghead Gas X or Dry Gas						P. O. Box 2648 Houston, TX 77001  Address (Give address to which approved copy of this form is to be sent)					
Texaco Prod. Inc.						P. O. Box 3000 Tulsa, OK 74102					
well produces oil or liquids, Unit Sec. Twp. Rge.					Is gas actually connected? When						
give location of tanks.	E	9		2S 37E	ing order num			unknov unknov		<u> </u>	
If this production is commingled with that f  IV. COMPLETION DATA	rom any our	er rease or	poor,	Rive continues	mg older name	·		- CITTLE O			
	<u> </u>	Oil Well	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded Date Compl. Ready to Prod.				•	Total Depth	<u> </u>	l	P.B.T.D.	l	<u> </u>	
vations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations					<u></u>			Depth Casing Shoe			
Periorations											
TUBING, CASING AND								<del></del>	SACKS CEMENT		
HOLE SIZE CASING & TUBING SIZE				S SIZE	DEPTH SET			SACKS CEMENT			
T MOON DAMA AND DEOLIES	T FOR A	HOW	ARI	F	<u> </u>			<u> </u>			
V. TEST DATA AND REQUES OIL WELL (Test must be after r	ecovery of to	ial volume	of loa	ss sd oil and must	be equal to or	exceed top allo	owable for thi	s depth or be	for full 24 ho	urs.)	
Date First New Oil Run To Tank	Producing M	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	<u> </u>	<del></del>			<u></u>			<del></del>			
Actual Prod. Test - MCF/D						Bbis. Condensate/MMCF			Gravity of Condensate		
esting Method (pitot, back pr.)  Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size			
	 		ייי זרו	ANCE	<del> </del>	<del> </del>					
VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above					OIL CONSERVATION DIVISION  OCT 3 1989						
is true and complete to the best of my knowledge and belief.  HAWKINS OIL & GAS, INC.					Date	e Approve	ed			, 1000	
Philips g with					By_	By Orig. Signed by Paul Kautz					
Signature  Philip J. Wilner - Vice President-Gas Mrktg.  Printed Name September 18, 1989 (918) 585-3121								Paul K. Geolog	autz ist		
September 18, 1989			Sephor								

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.

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SEP 29 1989

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