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U.S.G.S.	
LAND OFFICE	
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-11
Effective 1-1-65

I. Operator
SOHIO NATURAL RESOURCES COMPANY
Address
P. O. Box 3000 Midland, Texas 79702
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☒ Castinghead Gas ☐ Condensate ☐ Other (Please explain)
Formerly Paddock (San Angelo) Unit
Well No. 82

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hinton	Well No. 7	Pool Name, including Formation Eunice, S. (San Andres)	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter L 2970 Feet From The North Line and 330 Feet From The West	Line of Section 12 Township 22S Range 37E	NMPM, Lea 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3119, Midland, TX
Name of Authorized Transporter of Castinghead 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 1650, Tulsa, OK
If well produces oil or gas, give location of lease Unit L 12 22S 37E	Is gas actually connected? When Yes

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designation of type of completion (X) X	Oil well <input checked="" type="checkbox"/> Gas well <input type="checkbox"/> New well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug back <input type="checkbox"/> Sand control <input type="checkbox"/> M. Reel <input checked="" type="checkbox"/>		
Date Spudded 7-18-79	Date Compl. Ready to Prod. 7-29-79	Total Depth 5180'	P.B.T.D. 5018'
Elevations of Casing, Tubing, etc. 3363 RDB	Name of Producing Formation San Andres	Oil, Gas, or Dry 3909'	Tubing Depth 4001'
Perforations 3909-3921'			Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	8-5/8"	1152'	
	5-1/2"	5179	600

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 greater than allowable for this depth or be for full 24 hours)


Date First New Oil Run To Tanks 7-28-79	Date of Test 8-09-79	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure 40 psi	Casing Pressure 40 psi	Choke Size 2"
Actual Prod. During Test 5.5 bbls oil	Oil-Bbls. 5.5	Water-Bbls. 54.3	Gas-MCF .9

GAS WELL

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

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)

District Superintendent

(Title)

August 10, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED

AUG 13 1979

BY

TITLE

Geologist

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.

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O.C.D. HOBBY OFFICE