

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-105
Effective 1-1-65

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LAND OFFICE	
TRANSPORTATION	OIL GAS
OPERATOR	
PRORATION OFFICE	

I. Operator
SOHIO NATURAL RESOURCES COMPANY
Address: **P. O. Box 3000 Midland, TX 79702**
Reason(s) for filing (check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain) **CHANGE NAME ONLY**
If change of ownership give name and address of previous owner **Sohio Petroleum Company**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hinton #3	Well No. 13	Pool Name, Including Formation wanty Granite Wash	Kind of Lease State, Federal or Fee Fee
Location Unit Lease L 2310 Feet From The South Line and 990 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 ☒ or Condensate ☐ The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland		
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 1650, Tulsa, OK		
If well produces oil, condensate, give location of tank	Unit K	Sec. 12	Twp. 22S
	Range 37E	Is gas actually connected? Yes	When April 1973

If this production is commingled with that from any other lease or pool, give commingling order number: **PC-485**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	Refractured	Workover	Deepen	Plug back	Other
Date Spudded	Date Compl. Ready to Prod.	Test Date	P.E.T.D.				
Elevation (ft.)	Name of Producing Formation	Test Oil - (bbls./hr.)	Testing Depth				
Perforations				Depth Casing (ft.)			
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				

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 the allowable for this depth or be for full 24 hours)

Date First Flow - Run To Tanks	Date of Test	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

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (piston, 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)
May 22, 1979
(Date)

OIL CONSERVATION COMMISSION

JUN 20 1979

APPROVED
BY **Jerry Sexton**
Dist 1, Supv.
TITLE

This form is to be filed in compliance with RULE 115A.
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.

RECEIVED

MAY 25 1979
OIL CONSERVATION COMM.
HOBBS, N. M.