	-0. OF COPIES RELEIVED DISTRIBUTION ANTA FE ILE .S.G.S. LAND OFFICE	REQUES	CONSERVATION COMMISSION T FOR ALLOWABLE AND RANSPORT OIL AND NATURAI	- Porm C-104 - Supersedes Old C-104 and C-1. Effective 1-1-65 L GAS	
1.	I RANSPORTER OIL   GAS   OPERATOR   PRORATION OFFICE   Operator   HNC Oil Company   Address				
	P.O. Box 2267, Midla Reason(s) for filing (Check proper bo New Well X Recompletion Change in Ownership	Change in Transporter of: Oil Dry C	Other (Please explain) Gas		
	If change of ownership give name and address of previous owner	THIS WELL HER BUCH	PLADER RELATION ROOM		
II.	DESCRIPTION OF WELL AND	LEASE CONTRACTOR	K- 4570		
	Lease Name Wilson 17 Federal	Well Nc. Pool Name, including 2 Sioux Tansil	Formation Kind of Le	ase Lease No. eral of Fee Federal NM 18644	
	Location	O Feet From The East	0		
	Line of Section 17 To	winship 26S Range	36E , NMPM, Le	ea County	
111.	Name of Authorized Transporter of C:	<b>M</b>	Address (Give address to which app	roved copy of this form is to be sent)	
	Western Crude Oil, Inc.		Box 1142, Midland, Texas 79701 Address Give address to which approved copy of this form is to be sent)		
	<u>El Paso Natural Gas</u>		Box 1492, El Paso, Te		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. H 17 26S 36E		vhen. 12-4-80	
IV.	COMPLETION DATA	ith that from any other lease or pool,	give commingling order number:		
	Designate Type of Completi	on - (X) X Date Compl. Ready to Fred.	X	Flug Back Same Res'v. Diff. Res'v.	
				P.B.T.D.	
	5-31-80 Elevations (DF, RKB, RT, GR, etc.)	7-1-80 Name of Producing Formation	3700' Tep Dil Gas Pay	3475' Tubing Depth	
	2946' GR	Tansill		2418	
	Perforations 3186'3405'		, ,	Depth Casing Shoe	
	3186 - 3403	TUBING, CASING, AN	D CEMENTING RECORD	3700	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	<u> </u>	<u>8-5/8"</u> 5-1 /2"	1500	700 HLW & 200 C1C 450 HLW & 225 C1C	
		2-3/8" Tubing			
J.					
•.	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- able for this depth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas)	lift, etc.)	
ŀ	<u>7-1-80</u> Length of Test	<u>12-12-80</u> Tubing Pressure	Flow Casing Pressure	Choke Size	
		210		20/64	
	12 barrels	1	7	29	
•		1			
ſ	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbla, Condensate/MMCF	Gravity of Condensate	
ľ	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI I	CERTIFICATE OF COMPLIAN				
•••	CENTRICATE OF COMPERAN			OIL CONSERVATION COMMISSION	
(	Commission have been complied w	egulations of the Oil Conservation with and that the information given best of my knowledge and belief.			
	$\mathcal{O}$				
	D. Non	_			
-	Betty a: Nel do	Betty A. Gildon			
	Regulatory Clerk				
-	(Tit	le)			
<u>12-17-80</u> (Date)			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.		