STATE OF NEW MEXICO HGY AND MIDEBALS DEPARTMENT		ATION DIVISIOL	Form C-104 Revised 10-1-78
01417/1001 1ANTA 72		OX 2088 W MEXICO 87501	
V 4.0.4.			•
LAND OFFICT		DR ALLOWABLE AND	
DAS UPERATOR PROMATION OFFICE		SPORT OIL AND NATURAL GAS	
HNG OIL COMPANY			
P. O. Box 2267, Midlan	d. Texas 79702		
Frason(s) for filing (Ehech proper bo	x)	Other (Please explain)	<u></u>
New Well	Change in Transporter ol: Cil Dry G	Effective 9/	1/82
Charige In Ownership	Casinghead Gas Cond	ensale	
If change of ownership give name and address of previous owner			·
DESCRIPTION OF WELL AND	VELLASE Well No. Pool Name, Including	Formation Comanche	
Wilson 21 Federal	1 Stateline Tans		Heral of Fee Federal NM 23199
Unit Letter N ; 16	50 Feel From The West L	ine and <u>330</u> Feet Fr	om The <u>south</u>
Line of Section 21 T	ownship 26S Range	36Е , ммрм,	Lea County
DESIGNATION OF TRANSPOL	RTER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of C The Permian Corporatio	n or Condensate	P. O. Box 1183, Houst	proved copy of this form is to be sent) con, Texas 77001 proved copy of this form is to be sent)
Nume of Authorized Transporter of C El Paso Natural Gas Co	mpany	P. O. Box 1492, E1 Pa	150. Texas 79978
If well produces oil or liquida, give location of tanks.	Unit Sec. Twp. Rge. N 21 26 36	Yes	When 7-5-79
If this production is commingled w COMPLETION DATA	with that from any other lease or pool		
Designate Type of Complet	ion - (X) Gas well	New Well Workover Deepen	Plug Bacx Same Res'v. Dill. Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elavations (DF, RKB, RT, GR, etc.)	Mame of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
*	TUBING, CASING, AN	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
. TFST DATA AND REQUEST 1 OIL WFLL. Date First New Oil Run To Tonxs	FOR ALLOWABLE (Test must be able for this of Date of Test	after recovery of total volume of load depth or be for full 24 houre) Producing Nothod (Frow, pump, ga	oil and must be equal to or exceed top allow is lift, etc.)
	Tubing Pressure	Casing Pressure	Choke Size
Length of Teel	Laping Plessale		Gas-MCF
Actual Pred. During Tool	Oll-Bbls.	Water - Bbla.	Gar-MCF
GAS WELL	Length of Test	Bbis. Condensate A.M.CF	Gravity of Condeneate
Actual Frog. 1MCF/D		Cusing Pressue (Shut-in)	Choke Size
Testing Method (pitor, back pr.)	Tubing Presews (Shut-in)		
CERTIFICATE OF COMPLIA	NCE	11	VATION DIVISION
I hereby certify that the rules and	i regulations of the Oil Conservation	APPROVED_AUL	. 1982
Division have been complied with and that the information given shove is true and complete to the best of my knowledge and belief.		BYORIGINAL SICH	
\langle		TITLE JERRY AND A VAL	
David D. O.D. Batty Gilden		This form is to be filed in compliance with RULE 1104.	
Betty Allow Betty Gildon		well, this form must be accompanied by a tabulation of the deviated that a table on the well in accordance with RULE 111.	
Regulatory Analyst		All sections of this form must be filled out completely for allow while on new and recompleted wells.	
August 9, 1982		Fill out only Sections 1. II, III, and VI for changes of owner well name or number, or transporter or other such change of condition	
	Dute)	Separate Forms C-104	must be filed for each pool in multip
		Completed wells.	

