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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
TO CORRECT TUBING DEPTH UNDER ITEM IV

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator HNG Oil Company	
Address P.O. Box 2267, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Wilson 8 Federal	Well No. 7	Pool Name, Including Formation Sioux Tansill Yates	Kind of Lease State, Federal or Fee Federal	Lease No. NM 18644
Location				
Unit Letter 0 ; 853 Feet From The South Line and 1787 Feet From The East				
Line of Section 8 Township 26S Range 36E , 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"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2297, Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.	Unit T	Sec. 8	Twp. 26S	Rge. 36E	Is gas actually connected? Yes	When 6-10-80

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-5-80	Date Compl. Ready to Prod. 6-9-80	Total Depth 3700'	P.B.T.D. 3675'					
Elevations (DF, RKB, RT, GR, etc.) 2965' GR	Name of Producing Formation Tansill Yates	Top Oil/Gas Pay 3212'	Tubing Depth 3226'					
Perforations 3212 - 3606	Depth Casing Shoe 3646'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
11"	8-5/8"	1400'	600 HLW & 200 C1C					
7-7/8"	5-1/2"	3646'	425 HLW & 225 C1C					
	2-3/8"	3226'						

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

Date First New Oil Run To Tanks 6-7-80	Date of Test 6-17-80	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 20-100 psi	Casing Pressure Packer	Choke Size -
Actual Prod. During Test 15 bbls.	Oil-Bbls. 15	Water-Bbls. 34	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

Betty A. Gildon Betty A. Gildon
(Signature)
Regulatory Clerk
(Title)
July 24, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 26 1980, 19
BY John W. Runyan
TITLE General

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.

INCLINATION REPORT

(One Copy Must Be Filed With Each Completion Report.)

1. OLD NAME SiouxYates		2. LEASE NAME Wilson 8 Federal		6. District 1
3. OPERATOR HNG Oil Company				7. Lease Number (Oil completions only) NM 18644
4. ADDRESS P.O. Box 2267 Midland, Texas 79702				8. Well Number 7
5. LOCATION (Section, Block, and Survey) Unit Letter 0, 853' FSL & 1787' FEL, Sec. 8, T26S, R36E				9. Identification Number (Gas completions only)
				10. County Lea

RECORD OF INCLINATION

11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
495	495	3/4	1.31	6.48	6.48
1008	513	1-1/4	2.18	11.18	17.66
1400	392	3	5.23	20.50	38.16
1904	504	4-1/4	7.41	37.35	75.51
2386	482	4-3/4	8.28	39.91	115.42
2897	511	4	6.98	35.67	151.09
3700	803	2-1/2	4.36	35.01	186.10

If additional space is needed, use the reverse side of this form.

Does any information shown on the reverse side of this form? ☐ yes ☒ no

Accumulative total displacement of well bore at total depth of 3700 feet = 186.10 feet.

Inclination measurements were made in - ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe

Distance from surface location of well to the nearest lease line 853' feet.

Minimum distance to lease line as prescribed by field rules 330' feet.

Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? No

If the answer to the above question is "yes", attach written explanation of the circumstances.)

<p>INCLINATION DATA CERTIFICATION</p> <p><u>Richard B. Shaw</u> Signature of Authorized Representative Richard B. Shaw Name of Person and Title (Type or print) Price Drilling Company Name of Company Telephone: _____ Area Code _____</p>	<p>OPERATOR CERTIFICATION</p> <p><u>Betty A. Gildon</u> Signature of Authorized Representative Betty A. Gildon, Regulatory Clerk Name of Person and Title (Type or print) HNG Oil Company Operator Telephone: <u>915</u> <u>683-4871</u> Area Code _____</p>
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CHERYL A. MINCES - Notary Public
In and for Midland County, Texas
My Commission Expires 9-4-81

Subscribed and Sworn to before me on this 17 day of June 1980.

Notary Public in and for Midland County, Texas Cheryl A. Mince

RECORD OF INCLINATION (Continued from reverse side)

[illegible]

If additional space is needed, attach separate sheet and check here. ☐

REMARKS: _____

JUN 19 1980

- INSTRUCTIONS -

An inclination survey made by persons or concerns approved by the Commission shall be filed on a form prescribed by the Commission for each well drilled or deepened with rotary tools or when, as a result of any operation, the course of the well is changed. No inclination survey is required on wells that are drilled and completed as dry holes that are plugged and abandoned (Inclination surveys are required on re-entry of abandoned wells.) Inclination surveys must be made in accordance with the provisions of Statewide Rule

This report shall be filed in the District Office of the Commission for the district in which the well is drilled; by attaching one copy to each appropriate completion for the well. (except Plugging Report)

The Commission may require the submittal of the original charts, graphs, or discs, resulting from the surveys.