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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-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 ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Wilson 9 Federal	Well No. 4	Pool Name including Formation Sioux Yates	Kind of Lease State, Federal or Fee Federal	Lease No. NM 18644
Location Unit Letter K ; 1980 Feet From The South Line and 1980 Feet From The West Line of Section 9 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"/> Basin, Inc.	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"/> El Paso Natural Gas Company	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 L	Sec. 9	Twp. 26S	Rge. 36E	Is gas actually connected? Yes	When 4-8-80

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 2-24-80	Date Compl. Ready to Prod. 3-24-80	Total Depth 3700'	P.B.T.D. 3640'					
Elevations (DF, RKB, RT, GR, etc.) 2958' GR	Name of Producing Formation Tansill Yates	Top Oil/Gas Pay 3270	Tubing Depth 3200'					
Perforations 3270 - 3472 (Tansill Yates) & 3571 - 3629 (Seven Rivers)	Depth Casing Shoe 3700'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 1415'		SACKS CEMENT 600 HLW & 300 C1C			
7-7/8"	5-1/2"		3700'		450 HLW & 225 C1C			
	2-7/8" Tubing		3200' (3305 See Correction)					

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 4-8-80	Date of Test 5-8-80	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure Packer	Choke Size
Actual Prod. During Test 58 barrels	Oil - Bbls. 58	Water - Bbls. 46	Gas - MCF 5

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
(Signature)
Regulatory Clerk
(Title)
5-13-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 10 1980
BY [Signature]
Geologist
TITLE

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.
Form C-104 must be filed for each well in compliance

INCLINATION REPORT (One Copy Must Be Filled With Each Completion Report.)		6. District <div style="text-align: center;">1</div>
1. WELL NAME Sioux Yates		7. Lease Number (Oil completions only) NM 18644
2. LEASE NAME Wilson 9 Federal		8. Well Number <div style="text-align: center;">4</div>
3. OPERATOR HNG Oil Company		9. Identification Number (Gas completions only)
4. ADDRESS P. O. Box 2267, Midland, Texas 79702		10. County <div style="text-align: center;">Lea</div>
5. LOCATION (Section, Block, and Survey) Unit Letter K, 1980' FSL & 1980' FWL, Sec. 9, T26S, R36E		

RECORD OF INCLINATION

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)
468	468	3/4	1.31	6.13	6.13
949	481	1-1/4	2.18	10.49	16.62
1415	466	1-1/2	2.62	12.21	28.83
1905	490	2-1/2	4.36	21.36	50.19
2390	485	3-1/4	5.67	27.50	77.69
2939	549	1-3/4	3.05	16.74	94.43
3700	761	1	1.75	13.32	107.75

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

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

Accumulative total displacement of well bore at total depth of 3700' feet = 107.75 feet

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

Distance from surface location of well to the nearest lease line 660 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.)

INCLINATION DATA CERTIFICATION

Signature of Authorized Representative
Richard B. Shaw
 Name of Person and Title (type or print)
Richard B. Shaw
 Name of Company
Price Drilling Company
 Telephone: _____
 Area Code _____

OPERATOR CERTIFICATION

Signature of Authorized Representative
Betty A. Gildon
 Name of Person and Title (type or print)
Betty A. Gildon Regulatory Clerk
 Name of Company
HNG Oil Company
 Operator
 Telephone: 915 683-4871
 Area Code _____

Subscribed and Sworn to before me on this 13 day of May 1980

Notary Public in and for Midland County, Texas

1

[illegible]

DATE	DESCRIPTION	AMOUNT	CHECK NO.	BANK	INITIALS
12-1-78
12-2-78
12-3-78
12-4-78
12-5-78
12-6-78
12-7-78
12-8-78
12-9-78
12-10-78
12-11-78
12-12-78
12-13-78
12-14-78
12-15-78
12-16-78
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12-22-78
12-23-78
12-24-78
12-25-78
12-26-78
12-27-78
12-28-78
12-29-78
12-30-78
12-31-78

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

REMARKS:

This report shall be filed in the District Office of the Commission for the district in which the well is drilled, by attaching one