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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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-105
Effective 1-1-65

I.

Operator Doyle Hartman	
Address P. O. Box 10426, 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 State UTP	Well No. 2	Pool Name, including Formation Rhodes-Yates	Kind of Lease State, Federal or Fee	Lease No. B-7606
Location				
Unit Letter G	2310	Feet From The North	Line and 2310	Feet From The East
Line of Section 28	Township 26-S	Range 37-E	NMPM, Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Texas-New Mexico Pipeline Company	P. O. Box 2528, Hobbs, New Mexico 88240					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P. O. Box 1384, Jal, New Mexico 88252					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 28	Twp. 26	Rge. 37	Is gas actually connected? Yes	When 11-06-80

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 ☒	Gas Well	New Well ☒	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded 10-21-80	Date Compl. Ready to Prod. 11-05-80		Total Depth 3400		P.B.T.D. 3392			
Elevations (DF, RAB, RT, GR, etc.) 2966 G.L.	Name of Producing Formation Rhodes-Yates		Top Oil/Gas Pay 2990		Tubing Depth 3266			
Perforations 2990-3171 w/17 (Rhodes-Yates)					Depth Casing Shoe 3400			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8		426		300 (circ)			
7 7/8	5 1/2		3400		600 (circ)			
	2 3/8		3266					

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 11-05-80	Date of Test 11-06-80	Producing Method (Flow, pump, gas lift, etc.) Pumping (11 x 64 x 1-1/2)	
Length of Test 24 hours	Tubing Pressure	Casing Pressure PCP= 362	Choke Size 12/64
Actual Prod. During Test	Oil-Bbls. 80	Water-Bbls. 33	Gas-MCF 318

GAS WELL

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

Michelle Hernandez
(Signature)

Administrative Assistant
(Title)

November 7, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Gregory Smith
TITLE SUPERVISOR DISTRICT 1

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 deviate 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.

Separate Form C-104 must be filed for each pool in multiple completed wells.