

## OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

HNG OIL COMPANY

Address

P. O. Box 2267, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☒Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

*R. 8356 12-1-86  
Heldent W. Pitchfork Ranch w/c Gas*

Lease Name Madera Ridge 25 Fed. Com.	Well No. 1	Pool Name, including Formation West Pitchfork Ranch Wlfcg	Kind of Lease State, Federal or Fee Federal	Lease No. NM 19858
Location Unit Letter <u>L</u> ; <u>1980</u> Feet From The <u>south</u> Line and <u>660</u> Feet From The <u>west</u> Line of Section <u>25</u> Township <u>24S</u> Range <u>33E</u> , NMPM, Lea County				

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Enron Oil Trading & Transportation Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 20108, Shreveport, LA 71120					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2521, Houston, Texas 77001					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 25	Twp. 24S	Rge. 33E	Is gas actually connected? Yes	When 9-16-86

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

## COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
		X				X		
Date Spudded- PB 9-8-86	Date Compl. Ready to Prod. 9-15-86	Total Depth 15,750'	P.B.T.D. 13,742'					
Elevations (DF, RKB, RT, GR, etc.) 3556' GR	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 13,528	Tubing Depth 2-7/8" at 13,420'					
Perforations 13528 - 13580	Depth Casing Shoe							

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	600	600 C1 C
12-1/4	9-5/8	5087	1900 Lite & 475 C1 C
8-3/4	7"	13420	750 Lite & 400 C1 H
6-1/8	5-1/2 Liner	15000 TOL: 13060	200 C1 H

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

## GAS WELL

Actual Prod. Test-MCF/D 2500	Length of Test 24 hours	Bbls. Condensate/MMCF 3.20	Gravity of Condensate 49.0
Testing Method (prior, back pr.) Back Pressure	Tubing Pressure (Shut-in) 8200	Casing Pressure (Shut-in) Sealed	Choke Size 16/64"

## CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation  
Division have been complied with and that the information given  
above is true and complete to the best of my knowledge and belief.*Betty Gildon* Betty Gildon  
(Signature)  
Regulatory Analyst

September 24, 1986

(Date)

3-1/2" Liner at 14,973'

TOL: 14036, 140 Sx. C1 H

## OIL CONSERVATION DIVISION

APPROVED SEP 29 1986, 19BY ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

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 deviated  
tools taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allow-  
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own-  
er, well name or number, or transporter, or other such change of conditio-Separate Forms C-104 must be filed for each pool in multi-  
pleted wells.*2 A atek 10/9/86*