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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-110  
Effective 1-1-65

JUL 13 10 43 AM '65

Elwyn C. Hale

209 Turner Drive, Hobbs, New Mexico 88240

Reason for filing of this application:

Other: Please explain:

Change in Pool Designation

If change of ownership give name  
and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Owner	Hale-State	Section	2	Owner's Name, including location	Justis Tubb-Drinkard	Kind of Lease	State
						State, Federal or Free	B-2317
Location	G	1980	Feet from Top	North	1650	Feet from Top	East
Section	2	Township	25-South	Range	37-East	County	Lea

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/> or Non-Sentate	Address: Give address to which approved copy of this form is to be sent				
Texas-New Mexico Pipe Line Company		P. O. Box 1510, Midland, Texas				
Name of Authorized Transporter of Unsegregated Gas	<input checked="" type="checkbox"/> 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				
If well is owned by a company, give company name	H	2	25 S	37 E	Yes	June 28, 1964

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	Flow Well	Workover	Deepen	Plug Back	Sole Reservoir, Diff. Reservoir
Date of Completion	Date of Completion		Total Depth		Depth to		
Time of Previous Completion	Top of Gas Pay		Depth to				
Depth to		Depth to					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Test must be after recovery of total volume of liquid oil and must be equal to or exceed top allowable for this depth or no for full 24 hours

Date of Test	Date of Test	Flow Rate (Flow, pump, gas, etc.)	
Flow Rate	Flow Rate	Flow Rate	Flow Rate
Flow Rate	Flow Rate	Flow Rate	Flow Rate
Flow Rate	Flow Rate	Flow Rate	Flow Rate

GAS WELL

Date of Test	Date of Test	Flow Rate	Flow Rate
Flow Rate	Flow Rate	Flow Rate	Flow Rate
Flow Rate	Flow Rate	Flow Rate	Flow Rate
Flow Rate	Flow Rate	Flow Rate	Flow Rate

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

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.

APPROVED \_\_\_\_\_, 19

BY

TITLE

L. O. Storm

Professional Engineer

July 12, 1965

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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.