	DISTRIBUTION				
	FILE		FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	AS	
	TRANSPORTER OIL				
	GAS OPERATOR	_			
1.	PRORATION OFFICE				
	HNG 011 Company				
	Address P. O. Box 767, Midland, Texas 79701				
	Reason(s) for filing (Check proper box) Temp Other (Please explain)				
	Recompletion				
	Change in Ownership Casinghead Gas Condensate EDURATIO 114070				
	If change of ownership give name and address of previous owner	·			
IJ.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.				
	RAF "30"	2 Dollarhide/Fu		or ForFederal	
Line of Section 30 Township 24-S Range 38-E , NMPM, Lea				County	
III.	ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	Texas-New Mexico Pipe		P. O. Box 1510. Midlan Address (Give address to which approve	1, Texas 79701	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be so Vented			d copy of this form is to be sent)	
	If well produces oil or liquids, Unit Sec. Twp. Pge. Is gas actually connected? When give location of tanks. 11011 30 24-5 38-E No				
	this production is commingled with that from any other lease or pool, give commingling order number:				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio	n - (X) X Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.	
	3-16-72	5-1-72	8,737'		
	Elevations (DF, RKB, RT, GR, etc.) 3,139' GR.	Name of Producing Formation Fusselman	Top Oil/Gas Pay 8,703'	Tubing Depth 8.700 ⁴	
	Perforations			Depth Casing Shoe	
	8,703-8,737' Open Hole TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET 615'	SACKS CEMENT	
	12 1/4"	<u>9 5/8"</u>	3,800'	1,750 sacks	
	8 3/4"	5 1/2"	8,703'	1,000 sacks	
v .	TEST DATA AND REQUEST FO	DR ALLOWABLE (Test must be a	fter recovery of total volume of load oil an	d must be equal to or exceed top allow-	
i	IL. WELL able 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.)				
	5-1-72	5-3-72 Tubing Pressure	Casing Pressure	Pumping Choke Size	
	Length of Test 24	45	40	Open	
	Actual Prod. During Test 183	Сіі-Быз. 162	Water - Bble. 21	Gas-MCF 91	
l	105	102	<u> </u>	Z.	
ſ	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 (thut-in)	Choke Size	
Į					
VI.	CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION			1972	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED IIAT 10 1014		
1	above is true and complete to the best of my knowledge and belief.		SUPERVISOR DISTRICT 1		
	Harry K. McBride)		This form is to be filed in cor If this is a request for allowar	ie for a newly drilled or despense	
	(Signature) Admin. Ass't. to Dist. Supt.		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
-	May 15, 1972 (Title)		able on new and recompleted wells		
-	(Date)		well name or number, or transporten,		
			Separate Forms C-104 must t	e filed for each pool in multiply	

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MINT 1 C 1972 OLE CONSERVITION COMM. HOBBS, N. M.