

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
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 767, Midland, Texas 79701**
Reason(s) for filing (Check proper box) ☒ New Well ☐ Recompletion ☐ Change in Ownership ☐ Change in Transporter of: Oil ☐ Gashead Gas ☐ Dry Gas ☐ Condensate ☐ Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name (including Formation)	Kind of Lease	Lease No.
Elliott Federal "31"	8	Dollarhide/Devonian	State, Federal or Fee Federal	NM 0349953
Location				
Unit Letter E	1650	Feet From The North Line and	990	Feet From The West
Line of Section 31	Township 24-S	Range 38-E	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"/>	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 79701	
Name of Authorized Transporter of Gashead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	600 Bldg. of Southwest, Midland, Texas 79701	
If well produces oil or liquids, give location of tanks.	Unit D	Section 31 Township 24-S Range 38-E Is gas actually connected? Yes When 8-1-72

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.S.D.C.				
6-26-72	7-31-72	8410'		8368'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
3118' GR.	Dollarhide/Devonian	8290'		8306'				
Perforations		Depth Casing Shoe						
Perf. .720" hole w/720 Co Devil Decentralized gun at 8296-98'		TUBING, CASING, AND CEMENTING RECORD		8306-14', 16,18,20, & 22.				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
17 1/2"	13 3/8"	637'		750 sacks				
11"	8 5/8"	3920'		1200 sacks				
7 7/8"	5 1/2"	8410'		550 sacks				

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
7-31-72	8-1-72	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	80 psi	0 (Packer)	16/64
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
83	83	0	86

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.

(W. L. Lorette)
District Superintendent

August 7, 1972

OIL CONSERVATION COMMISSION
AUG 19 1972
APPROVED
BY
TITLE
SUPERVISOR DISTRICT I

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.

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

RECEIVED

AUG 8 1972

OIL CONSERVATION COMM.
HOUSTON, TEXAS