

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-1
Effective 1-1-65

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FILE	
U.S.C.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator
Doyle Hartman

Address
P. O. Box 10426, 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal Jalmat "Com"	Well No. 1	Pool Name, Including Formation Jalmat (Yates-Seven Rivers)	Kind of Lease State, Federal or Fee Federal	Lease No. LC-055546
Location Unit Letter <u>D</u> ; <u>590</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>6</u> Township <u>25S</u> Range <u>37E</u> , NMPM, <u>Lea</u> 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)
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 Sec. Twp. Rge. Is gas actually connected? When No 3-28-80

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 Resv. Diff. Resv. ☐
Date Spudded 2-14-80	Date Compl. Ready to Prod. 3-22-80		Total Depth 3300		P.P.T.D. 3285		
Elevation (D.F., R.R., RT, GR, etc.) 3235 G. L.	Name of Producing Formation Yates-Seven Rivers <i>or Juh</i>		Top Oil/Gas Pay 2778		Tubing Depth 2839		
Perforations 2778-3267 Jalmat (Yates-Seven Rivers)				Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
12 1/4	9 5/8, 32 lb/ft		403		150 (circ 125)		
8 3/4, 7 7/8	5 1/2, 17 lb/ft		3300		550 (circ 75)		
	2 3/8		2839				

V. TEST DATA AND REQUEST FOR ALLOWABLE (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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
250 MCFPD	24 hours	---	---
Test Method (pilot, back pr.)	Tubing Pressure (lb/in)	Casing Pressure (lb/in)	Choke Size
choke nipple	SITP= 162, FTP= 116	SICP= 162, FCP= 145	18/64

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.

Nichelle Hernandez
(Signature)
Administrative Assistant
(Title)

March 24, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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 detailed 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 after such change of conditions. Separate Forms C-104 must be filed for each pool in multiple.