

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Superseding Old C-104 and C-110
Effective 1-1-65

I.

| | |
|------------------------|-----|
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| ANTA FE | |
| FILE | |
| S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRORATION OFFICE | |

Operator
HNG OIL COMPANY
Address
P. O. Box 2267, Midland, Texas 79702
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
vertical limits 14128 - 15003

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Draper Mill Upper Penn R-6876 1-1-82

| | | | | |
|--|---------------|---|--|---------------------|
| Lease Name Vaca Draw 16 State | Well No. 1 | Pool Name, including Formation Wildcat Atoka | Kind of Lease State, Federal or Fee State | Lease No. L-6328 |
| Location Unit Letter E; 1980 Feet From The North Line and 660 Feet From The West Line of Section 16 Township 25S Range 33E, NMPM, Lea County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|---|--|-------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Basin, Inc. | Address (Give address to which approved copy of this form is to be sent) P. O. Box 2297, Midland, Texas 79702 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978 | |
| If well produces oil or liquids, give location of tanks. | Unit E | Sec. 16 |
| | Twp. 25S | Rge. 33E |
| | Is gas actually connected? No | |

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 Res'v. | Diff. Res'v. |
| | | X | X | | | | | |
| Date Spudded 2-20-81 | Date Compl. Ready to Prod. 9-23-81 | Total Depth 16,075' | P.B.T.D. 14,845' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3416' GR | Name of Producing Formation Atoka | Top Oil/Gas Pay 14,248' | Tubing Depth 12,960' 2-7/8" | | | | | |
| Perforations 14,248' - 14,757' | | | Depth Casing Shoe 13,253' | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 17-1/2" | 13-3/8" | 560' | 550 | | | | | |
| 12-1/4" | 9-5/8" | 4924' | 3400 | | | | | |
| 8-1/2" | 7" | 13253' | 1050 | | | | | |
| 6-1/8" | 4-1/2" Liner | Top: 13,006' Btm: 16,072' | 600 | | | | | |

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.) | |
| 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 2100 | Length of Test 24 hours | Bbls. Condensate/MMCF 3 | Gravity of Condensate 40.0 |
| Testing Method (pilot, back pr.) Back Pressure | Tubing Pressure (Shut-in) 6750 | Casing Pressure (Shut-in) - | Choke Size 7/64" |

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.

Betty Gildon
Regulatory Analyst
October 13, 1981

OIL CONSERVATION COMMISSION

APPROVED OCT 28 1981, 19
BY Orig. Signed by
Les Clements
TITLE Oil & Gas Insp.

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.