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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-11
Effective 1-1-65

Operator Doyle Hartman	
Address Post Office Box 10426, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Northshore Woolworth	Well No. 6	Pool Name, including Formation Jalmat (Gas)	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Bottom Hole Location = 1967 FNL & 711 FWL Section 33, T-24-S, R-37-E					
Unit Letter E ; 1720 Feet From The North Line and 310 Feet From The West					
Line of Section 33 Township 24S Range 37E , NMPM, Lea County					

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Post Office 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	4-27-83

If this production is commingled with that from any other lease or pool, give commingling order number:

V. 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 4-7-83	Date Compl. Ready to Prod. 4-21-83	Total Depth 3426 (3366 TVD)	P.B.T.D. 3420 (3361 TVD)					
Elevations (DF, RKB, RT, GR, etc.) 3262 GL	Name of Producing Formation Yate-Seven Rivers	Top Oil/Gas Pay 3067 (3009 TVD)	Tubing Depth 3397 (3338 TVD)					
Perforations 3067-3273 (3009-3220) Yates-Seven Rivers			Depth Casing Shoe 3426 (3366 TVD)					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	9 5/8	467	250 (Circ)					
8 3/4	7	3426 (3366 TVD)	700 (Circ)					

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 112	Length of Test 24 Hr	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Orifice Tester	Tubing Pressure (Shut-in) 45 psi	Casing Pressure (Shut-in) 83 psi	Choke Size 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.

Larry G. Newman
(Signature)
ENGINEER
(Title)
APRIL 22, 1983
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 9 1983, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
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 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 re-completed wells.

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

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