

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES SUBMITTED	
DISTRIBUTION	
SANTA FE	
FILE	
RE.U.S.	
LAND OFFICE	
TRANSPORTER	OIL
	OR
OPERATION	
LOCATION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2038

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Hondo Oil & Gas Company

Address
P. O. Box 2208, Roswell, NM 88202

Reason(s) for filing (Check proper box)

☒ New Well	Change In Transporter of: ☐ Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate	Other (Please explain) Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)
☐ Recompletion		
☐ Change In Ownership		

Change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Well Name McClure "B"	Well No. 24	Pool Name, including Formation Dollarhide Queen	Kind of Lease State, Federal or Free Federal	Lease No. NM-10189
--------------------------	----------------	--	---	-----------------------

Location

Unit Letter A : 660 Feet From The North Line and 660 Feet From The East

Line of Section 30 Township 24S Range 38E , NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Koch Oil Co.	Address (Give address to which approved copy of this form is to be sent) Box 3609, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)

Well produces oil or liquids, or location of tanks.	Unit A	Sec. 30	Twp. 24S	Rge. 38E	Is gas actually connected? No	When
---	-----------	------------	-------------	-------------	----------------------------------	------

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

NOTE: Complete Parts IV and V on reverse side if necessary.

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

E. J. Bartholomew Jr.
(Signature)
Petroleum Engineer
(Title)
9/13/88
(Date)

OIL CONSERVATION DIVISION

APPROVED 567 21 1988 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 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
 SEP 14 1988
 OGD
 HOBBS OFFICE

Form C-104
 Revised 10-01-78
 Format 06-01-83
 Page 2

IV. COMPLETION DATA

Designate Type of Completion - (X)				Date Compl. Ready to Prod.		Total Depth		P.B.T.D.	
Oil Well	Gas Well	Flow Well	Workover	Deepen	Plug Back	Same Hlev'ty	Trill. Hlev'ty	Tubing Depth	
								3651'	4000'
								Depth Casing Shoe	
3750-3804'				3750'		4000'		4000'	

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	425'	250 SX. CLASS C W/2% CC
7 7/8"	5 1/2"	4000'	600 SX. LITE + 250 SX. CLASS C W/1 1/2% CC
	2 3/8"	3651'	

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load off and must be equal to or exceed top allow-
 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.)	Pumping	Casing Pressure	Choke Size	Gas - MCF	TSTM
8/1/88	9/1/88						
Length of Test							
24 hrs.							
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF				
	21 BO	87 BW					

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate	Testing Method (Flow, back prod.)	Tubing Pressure (Lb/in ²)	Casing Pressure (Subst-In)	Choke Size

Hondo Oil and Gas
McClure B-24
Lea County, N.M.

660/N + E
30-24-38

STATE OF NEW MEXICO
DEVIATION REPORT

424	1
910	1
1405	1/4
1900	1
2393	1/4
2768	1 1/4
3260	1/4
3757	1 1/4
4000	1 1/2

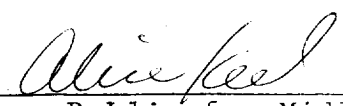
STATE OF TEXAS


By: Ray Peterson

COUNTY OF MIDLAND

The foregoing instrument was acknowledged before me this 19th day of July, 19 88, by Ray Peterson on behalf of Peterson Drilling Company.

My Commission expires: 8/2/88


Notary Public for Midland County,
Texas