	NO. OF COPIES RECEIVED			
	DISTRIBUTION	NEW MEXICO OIL CONS	ERVATION COMMISS.	Form C-104 Superaction Old C-104 and C-110
		REQUEST FOR	ALLOWABLE	Effective 1-1-95
	ANTA FE		ND	LED 2
	ILE	A		- C / C - C - C - C - C - C - C - C - C
		AUTHORIZATION TO TRANSF	PORT OIL AND NATURAL GAS	
- H	J.S.G.S.	AUTHORIZATION		~ 55 BH
	AND OFFICE			11 '25
	OIL			05
	RANSPORTER GAS			
1	OPERATOR			
I. [PRORATION OFFICE			
L 1 _	perator			· · · ·
		a a Componit		
	Humble Oil & Refini	ng Company		
- Г	ldress			
	Box 2100, Hobbs, Ne	w Mexico <u>88240</u>	Other (Please explain)	
	Reason(s) for filing (Check proper box)		Other (Prease exprand)	
		Change in Transporter of:		
	New Well			
	Recompletion X	Oil Dry Gas		
1		Casinghead Gas Condensat		
1	Change in Ownership	Λ	1. 011	to to to
-			In Courseller	aller
I	f change of ownership give name	11/1/1		
8	nd address of previous owner			
п. 1	DESCRIPTION OF WELL AND L	Well No. Pool Name,	Including Formation K	(ind of Lease
Ī	Lease Name			state, Federal or Fee State
1	New Mexico State AB	2 Fowler	Blinebry, Blinebry s	
· [
	Location	ما <u>ا</u> الم	510 Feet From The	East
· 1	н , 1400	Feet From The North Line a	nd Feet From The	
	Unit Letter		-	
	• / -	ahip 24-S Range <u>37-</u>	E , NMPM, Lea	a <u>County</u>
	Line of Section 16 , Town	ship 24-0 Hange 31		
		ER OF OIL AND NATURAL GAS	Address (Give address to which approved	copy of this form is to be sent)
ш.	Name of Authorized Transporter of Oil	X or Condensate		
			2003 Wilco Building, Mic	dland, Texas
	McWood Corporation		Address (Give address to which approve	d copy of this form is to be sent)
	Name of Authorized Transporter of Casi	nghead Gas 🔲 or Dry Gas 🛄 🥤	Address (Give address to Batta approve	
			<u> </u>	
	Vented at present	The Sec. Twp. Rge.	a gas actually connected? When	
	If well produces oil or liquids,	Unit Sec. , Lore ,		_
	give location of tanks.	H ! 16 24-S 37-E	No	
•	give location of tanks.		in committee ing order numberi	_
	It this production is commingled with	h that from any other lease or pocl, gi	ive commingning order nameer	
***	COMPLETION DATA			Plug Back Bame Resty, Diff. Resty.
14.		Oil well	New Well Workover Deepen	
	Designate Type of Completio	n = (X)	! X	
	Designate type of another		Total Depth	P.B.T.D.
	Date Spudded	Date Compt. Ready to Prode	_	5695
	200 1 2 2 2 2 2 2 6 6	W/O completed on 12-29-6	5 10,310	المحادث المح
	W/O started on II-20-0)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Pool	Nome of Frondering . comments	5383	5350
	Fowler Blinebry	Blinebry	5)05	Depth Casing Shoe
	- (5408, 5418, 5434, 5523	, 5538, 5553, 5224,	
	Fowler Blinebry Blinebry Depth Casing Shoe Perforations 5383, 5386, 5388, 5408, 5418, 5434, 5523, 5538, 5553, 5554, Depth Casing Shoe 5556, 5584, 5639, 5641, 5649, 5661, 5674 and 5694 10,310			
	15556, 5584, 5639, 5041,	TUBING, CASING, AND	CEMENTING RECORD	
		TUBING, CASINO, AND	U	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	and the second
		13-3/8"	294	375
	17-1/2"		4454	800
	12-1/4"	9-5/8"	10310	400
	8-3/4"	4-1/2"		
		211	5350	
	8-3/4"		the proof to any of total walnum of load oil i	and must be equal to or exceed top allow-
T.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be of	nth or he for full 24 hours)	· · · · · · · · · · · · · · · · · · ·
1	able for this depin or be for juit 24 months)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (r tow, pamp, and the	
	1	12-28-65	Flowing	
	12-23-65	Tubing Pressure	Casing Pressure	Choke Size
	Length of Test		1	20/64
:	24 hours	85#		3cs - MCF
	Actual Prod. During Test	Oll-Bbis.	Water - Bbls.	
		93	77	139
	170	<u> </u>		
	OAC WET I			
	GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Prod. Test-MCF/D			
	_ ·			Choke Size
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	
	·			
			OUL CONSERV	ATION COMMISSION
-	1. CERTIFICATE OF COMPLIANCE		UIL CONSERVA	
	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.			19
			APPROVED	
				·
			BY	
			TITLE	
	E / N		This form is to be filed in compliance with RULE 1104.	
	EN AN		i a statute for a newly drilled of deepend	
	Cist and			
	(Signature)		All sections of this form must be filled out completely for allow	
	• -			
	Dist. Adm. Supvr.			
	(Title)			
	((1118)	I	
	•	/	· · · · · · · · · · · · · · · · · · ·	I, and VI only for changes of owner the such change of condition
	12-29-65		Fill out Sections I, II, II	
	12-29-65	(Date)	Fill out Sections I, II, II	
	12-29-65		Fill out Sections I, II, II	II, and VI only for changes of owner orten or other such change of condition ust be filed for each pool in multip