Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

Energy, Minerals and Natural Resources Department

RECEIVED

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 Santa Fe, New Mexico 87504-2088 SEP 2 5 1992 REQUEST FOR ALLOWABLE AND AUTHORIZATION O. C. D.
TO TRANSPORT OIL AND NATURAL CAS. TO TRANSPORT OIL AND NATURAL GAS Operator Hanagan Petroleum Corporation Well API No. Address 30-015-26849 Box 1737 - Roswell, 88202 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change of purchaser of oil, effective 9/1/92: Enron Oil Trading & Transportation Co. Change in Transporter of: Recompletion Oil Dry Gas Change in Operator Condensate Casinghead Gas P.O. Box 1188, Houston, Tx. 77251-1188 If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Unocal HPC Fed. Kind of Lease Lost Tank Delaware 40219 Lease No. Siale, Federal or Fee Location NM-43556 Unit Letter H 1980 Feet From The North Line and 990 . Feet From The <u>East</u> Line 22 South Section 1 ILEMPRICATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil Township Range 31 East NMPM, Eddy County ESTOREMENT OF D. Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188, Houston, Tx. 77251-1188 Effective, 1.1.93 Name of Authorized Transporter of Casinghead Gas Address (Give address to which approved copy of this form is to be sent) Yates Petroleum Corporation 105 South Fourth St., Artesia, NM 88210 If well produces oil or liquids, give location of tanks. Unit Rge. Is gas actually connected? When? G If this production is commingled with that from any other lease or pool, give commingling order number: 31E Yes 10/2/91 IV. COMPLETION DATA Oil Well Gas Well Designate Type of Completion - (X) New Well | Workover Doepen Plug Back Same Res'v Diff Res'y Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 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 Tank Producing Method (Flow, pump, gas lift, etc.) Length of Test **Tubing Pressure** Casing Pressure Choke Size Actual Prod. During Test Oil - Bhis Water - Bbls. Gas- MCF **GAS WELL** Actual Prod. Test - MCF/D Length of Tost Bols. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. SEP 2 8 1992 Date Approved Signature Hugh P ORIGINAL SIGNED BY Hanagan <u>President</u> MIKE WILLIAMS Printed Nam Title SUPERVISOR, DISTRICT IT 9/24/92 Title. 505-623 -5053 Telephone No.

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104 UCT | 10 38 Jun 3Z

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

2) All sections of this form must be filled out for allowable on new and recompleted wells

2) All sections of this form must be filled out for allowable on new and recompleted wells.

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number transporter, or other such changes. 4) Separate Form C-104 must be filed for each pool in multiply completed wells. DATE 10.