

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Hanley Petroleum Inc.	Well API No. 30-015-27379
Address 415 W. Wall, Suite 1500, Midland, TX 79701	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Union 35 Federal	Well No. 2	Pool Name, including Formation Herradura Bend Delaware, East	Kind of Lease State, Federal or Fee	Lease No. Federal
Location Unit Letter F : 1980 Feet From The NORTH South Line and 1980 Feet From The West Line Section 35 Township 22-S Range 28-E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Scurlock-Permian	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX 77251					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Continental Natural Gas, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 21470, Tulsa, OK 74121					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 35	Twp. 22S	Rge. 28E	Is gas actually connected? Yes	When? 5/3/93

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 4/5/93	Date Compl. Ready to Prod. 5/3/93		Total Depth 8494		P.B.T.D. 8450			
Elevations (DF, RKB, RT, GR, etc.) 3082 GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 6118		Tubing Depth 5950			
Perforations 6118-6150					Depth Casing Shoe 8453			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	457	320 Circulated
7 7/8"	4 1/2"	8493	2245 Sx Circulated
	2 3/8"	5950	

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 5/4/93	Date of Test 5/12/93	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 1410	Casing Pressure 1690	Choke Size 14/64"
Actual Prod. During Test	Oil - Bbls. 31	Water - Bbls. 129	Gas - MCF 1443

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature **Greg Wilkes**
Printed Name **Greg Wilkes** Chief Engineer
Date **5/17/93** Title
Telephone No. **915/684-8051**

OIL CONSERVATION DIVISION

Date Approved **JUN 7 1993**

By **ORIGINAL SIGNED BY**
MIKE WILLIAMS
Title **SUPERVISOR, DISTRICT II**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 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.