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FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRORATION 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-110
Effective 1-1-65

RECEIVED

1967

Ernest A. Hanson

P. O. Box 1515, Roswell, New Mexico

Reason(s) for filing (Check proper box)

Change of ownership ☐
Change of operator ☐
Change of transporter ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Change operator from American
Petrofina Co. of Texas to Ernest
A. Hanson effective May 1, 1967

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hanson Federal - Tract #2	Well No. 14	Pool Name, including Formation Mason Delaware, North	Kind of Lease State, Federal or Fee Federal
Location Unit Letter H ; 1650 Feet From The North Line and 990 Feet From The East Line of Section 25 , Township 26-South Range 31-East , 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"/> Western Oil Transportation Co., Inc.	Address (Give address to which approved copy of this form is to be sent) Box 3120, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Rm. B-2, Phillips Bldg., Odessa, Texas					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 25	Twp. 26-S	Rge. 31-E	Is gas actually connected? Yes	When February 1, 1960

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		N.B.T.D.					
Perforations	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
				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 Flow to Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Depth of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Free Flowing Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Free Flowing Test (if/D)	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Test Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

Harry F. Schramm
(Signature)

Exploration Manager

(Title)

April 25, 1967

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19

BY *E. A. Hanson*

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 Sections I, II, III, and VI only 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.