

FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
REGISTRATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Supersedes OIL C-101 and C-110
Effective 1-1-65

Operator HANSON OIL CORPORATION	
Address P.O. Box 1515, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Request testing allowable of 2175 bbls. oil for February 1976
Recompletion ☒	
Change in Ownership ☐	
Change in Transporter of: Oil ☒ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE				
Lease Name Amoco State	Well No. 3	Pool Name, including Formation Flying "M" ABO	Kind of Lease State, Federal or Fee State	Lease No. K-6657
Location Unit Letter I ; 660 Feet From The East Line and 1980 Feet From The South Line of Section 10 Township 9-S Range 33-E , NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Permian Corporation				Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79701		
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Warren Petroleum Corporation				Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma 74001		
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 2	Twp. 9-S	Rge. 33-E	Is gas actually connected? Yes	When November 1975

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

COMPLETION DATA									
Designate Type of Completion - (X) ☒ Oil Well ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Reservoir ☐ D.N. Reservoir									
Date Spudded		Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, REB, 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			

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 Tanks		Date of Test		Producing Method (Flow, pump, gas lift, etc.)			
Length of Test		Tubing Pressure		Casing Pressure		Choke Size	
Actual Prod. During Test		Oil-Bbls.		Water-Bbls.		Gas-MCF	

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	

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED FEB 10 1976	
Ray Willis (Signature) Vice President/Production (Title) February 10, 1976 (Date)		BY Jerry L. Smith TITLE SUPPLEMENTARY SECRETARY This form is to be filed in compliance with RULE 110a. If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the pressure tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for flowable or non-flowable and non-completed 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.	