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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

SEP 22 11 21 AM '65

Operator Ernest A. Hanson	
Address P. O. Box 1515, Roswell, New Mexico	
Reason(s) for filing (Check proper box)	
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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mescalero Ridge Unit "35"	Well No. 13	Pool Name, Including Formation Pearl Queen	Kind of Lease State, Federal or Fee Federal
Location			
Unit Letter L	1980 Feet From The South Line and 990 Feet From The West		
Line of Section 35	Township 19-South	Range 34-East	NMPM, Lea 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"/> Shell Pipe Line Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1598, Hobbs, New Mexico		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma		
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 35	Twp. 19-S
		Rge. 34-E	Is gas actually connected? Yes
			When 9/20/65

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	New Well	Workover	Deepen.	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 8/16/65	Date Compl. Ready to Prod. 9/20/65	Total Depth 5200' dolo.	P.B.T.D. 5189'					
Pool Pearl	Name of Producing Formation Queen Formation	Top Oil/Gas Pay 4576'	Tubing Depth 4575'					
Perforations 1 SF @ 4576, 4595, 4597, 4605, 4617, 4619, 4745, 4881, 4885, 4929,		4931, 5024 & 5036		Depth Casing Shoe 5192'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 202'		SACKS CEMENT 125 sx. circ.			
7-7/8"	5-1/2"		5192'		350 sx.			

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)

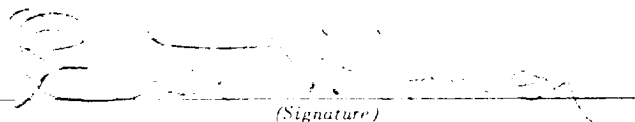
Date First New Oil Run To Tanks 9/20/65	Date of Test 9/20/65	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size 2"
Actual Prod. During Test	Oil-Bbls. 47	Water-Bbls. 3	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.


(Signature)
Operator
(Title)
September 20, 1965
(Date)

OIL CONSERVATION COMMISSION

APPROVED  , 19

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.