propriate District Office STRICT 1 O. Box 1980, Hobbs, NM 88240		Energy, Minerals and Natural Resources Department						See Instructions at Bottom of Page			
ISTRICT II O. Drawer DD, Artesia, NM 88210		Sa		P.O. Bo New Me					REC	EIVED	
ISTRICT III 000 Rio Brazos Rd., Aziec, NM 87410			•						وينهموني		
	HEQL					AUTHORIZ FURAL GA	S		MAM	15 30	
perator							Well A				
Hanson Operating Comp	any, Inc	2		<u> </u>		. <u></u>		30-0	05-6093		
ddress P. O. Box 1515, Roswe	11, New	Mexia	o 882	02-151					ARRE	A OFFICE	
eason(s) for Filing (Check proper box)		.	T		Оф	er (Please expla	<i>іл</i>)				
lew Well	Oil		Transport Dry Gas		Ef	fective M	by 1, 19	990		1	
hange in Operator	Casinghea	d Gas	Condens	ute							
change of operator give name d address of previous operator					<u> </u>						
DESCRIPTION OF WELL	AND LE	ASE									
case Name		Well No. Pool Name, Includin			Que			Lease Lease No. With Differ			
Hanlad "B" State		#5	DIac		Anures			<u> </u>			
Unit LetterM	3	30	Feet Fro	m The <u>SO</u>	uth_Lin	e and <u>330</u>	Fo	et From The _	West	Line	
Section 22 Towns	hin 10-1	S	Range	27 - E	. N	MPM. C	haves			County	
							<u></u>				
I. DESIGNATION OF TRA		OF OF O	IL ANI	NATU	RAL GAS	e address to wh	ich approved	copy of this fo	orm is to be se	ent)	
ame of Authorized Transporter of Oil X or Condensate					Р. О. В	ox 1188,	Houston	, Texas	77251-1	188	
me of Authorized Transporter of Casinghead Gas or Dry Gas					Address (Give address to which approved copy of this form is to be sent)						
N/A f well produces oil or liquids,	Unit	Sec.	Twp	Rge.	is gas actual	y connected?	When	?			
ve location of tanks.	М	22	105		No						
this production is commingled with the V. COMPLETION DATA Designate Type of Completion	<u> </u>	Oil Wel		as Well	New Well	Workover	Deepen	Piug Back	Same Res'v	Diff Res'v	
Designate Type of complete		Date Compl. Ready to Prod.			Total Depth		1	P.B.T.D.			
-					Top Oil/Gas Pay			Tubing Depth			
Elevations (DF, RKB, RT, GR, etc.)	B, RT, GR, etc.) Name of Producing Formation										
Perforations	·							Depth Casir	g Shoe		
		TIBING	CASIN	IG AND	CEMENT	NG RECOR	D	<u> </u>			
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEN	IENT	
			ADLE							<u> </u>	
Y. TEST DATA AND REQU DIL WELL (Test must be afte	EST FOR	ALLON wala volum	e of load a	il and must	be equal to o	r exceed top all	owable for thi	s depth or be	for full 24 ho	urs.)	
Date First New Oil Run To Tank	Date of T				Producing N	lethod (Flow, pr	ump, gas lift, i	elc.)	•		
	Tubine D	Tubing Pressure				Casing Pressure			Choke Size 5-25-90		
Length of Tes.	Tubing F	lubing riessure									
Actual Prod. During Test	Oil - Bbl	Oil - Bbls.				Water - Bbls.			Gas-MCF Cong LT: PE		
					J		·····				
GAS WELL Actual Prod. Test - MCF/D	Length o	(Test		. <u>.</u>	Bbls. Conde	assie/MMCF		Gravity of	Condensate		
MANUEL TON - TON - MICHING								Choke Size			
Festing Method (pilot, back pr.)	Tubing P	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			CIURE SING			
VI. OPERATOR CERTIF		FCOM	DI TAN	ICF	┨┌────						
	a.a.e.U					OU CO!	VSERV		•		
same with the that the rules and its	e mining of the	ne Oil Cons	DOLLEVIS								
	nd that the inl	ne Oil Cons formation g	iven above	:			M	AY 2 5	1990		
. Same while that the rules and its	nd that the inl	ne Oil Cons formation g	iven above	:	Dat	e Approve	edM	AY 2 5	1990		
	B. which of it and that the ini- ny knowledge	ne Oil Cons formation g and belief.	iven above						1990		
LIVENCE LAVE OCCU COMPLETE AND ARE LIVENCE HAVE OCCU COMPLETE WITH a is true and complete to the best of r	Bund that the inl ny knowledge	ne Oil Cons formation g	jven above		By.	ORIGI MIKE	NAL SIGN	NED BY			
	nd that the ind my knowledge	ne Oil Cons formation g and belief.	ion An Title		By.		NAL SIGN	NED BY			

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.