Appropriate District Utilice DISTRICT I P.O. Box 1980, Hobbs, NM 88240

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

OIL CONSERVATION DIVIS. JN

y, Minerals and Natural Resources Departmen

Santa Fe, New Mexico 87504-2088

P.O. Box 2088

Revised 1-1-89 See Instructions at Bottom of Pag

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Well API No Hanson Energy 300150049800 Address 342 S. Haldeman Rd. Artesia, N.M. 88210 KECEIVED Reason(s) for Filing (Check proper box) Other (Please explain) Г New Well Change in Transporter of: AUG - 9 1993 Recompletion Dry Gas Effective 8/1/93 Oil Change in Operator Casinghead Gas Condensate If change of operator give name Marbob Energy Corporation, Drawer 217, artesia, and address of previous operator N.M. II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No. NM 025527A Berry A 11 Red Lk, Qn, Grb, XSCRe, Federal or Fex Location 1650 Feet From The South Line and Unit Letter West Feet From The Line 17S Section 24 Township Range 27E Eddy , NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas Address (Give address to which approved core of this form is to be sent) 4001 Penbrook, Odessa, Tx. 79762 or Dry Gas X GPM Gas Corp If well produces oil or liquids, Twp. Unit Sec. Rge. Is gas actually connected? When? give location of tanks. yeś If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Diff Res'v Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD CASING & TUBING SIZE **HOLE SIZE** SACKS CEMENT and ID-10-9 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 Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure Casing Pressure Choke Size Actual Prod. During Test Oil - Bhla Water - Bbls. Gas- MCF GAS WELL Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Fosting Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above Date Approved \_\_\_AUG 1 1 1993 is true and complete to the best of my knowledge and belief. By\_ ORIGINAL SIGNED BY Kathie Hanson Secretary

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

Printed Name 7/30/93

Date

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

Title.

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

All sections of this form must be filled out for allowable on new and recompleted wells.

746-2262

Telephone No.

- 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.