	NO. OF COPIES RECEIVED	_	and the second second		
	DISTRIBUTION	NEW MEYICO OU. C	ONCEDIATION OF THE		
	SANTA FE /		CONSERVATION COMMILLION	Form C-104	
	FILE	- KEQUESI	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65	
	AND				
		AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS	
	LAND OFFICE			RECEIVED	
	TRANSPORTER OIL	_			
	GAS /	CHAR	10° 180 33 43 4		
	OPERATOR 2	CHAN	IGE IN NAME OF OPERATOR	FEB 2 8 1968	
1	PRORATION OFFICE	FROM	FPNECT A HANDON	. 20 2 0 1306	
	PRORATION OFFICE FROM: ERNEST A. HANSON  Operator				
	Ernest A. Hanson & Harold Kersey TO: HANSON OIL COMPANY ARTESIA, OFFICE				
	Address Effective: January 1, 1969				
	P. O. Box 1515, Roswell, New Mexico, 88201  Reason(s) for filing (Check proper box)  Other (Please explain)				
	New Well	•			
		Change in Transporter of:	- Fram the	Rermian Corp.	
	Recompletion	Oil X Dry Ga	<b>≒</b>	• • • • • • • • • • • • • • • • • • • •	
	Change in Ownership	Casinghead Gas Conder	nsate     Effective March	1, 1968	
	If change of ownership give name and address of previous owner				
	Lease Name	Well No.   Pool Na	me, Including Formation	Kind of Lease	
	Schram Federal	1 Red I	ake Queen Grayburg SA	State, Federal or Fee Federal	
	Location		100000000000000000000000000000000000000	100010	
	Unit Letter L ; 1980 Feet From The South Line and 330 Feet From The West				
	Line of Section 14 , To	wnship 17 South Range	28 East , NMPM,	Eddy County	
***	DESIGNATION OF TRANSPORT	TED OF OU AND MATURAL CA	25		
111.	Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	Address (Give address to which appro	oved copy of this form is to be sent)	
		or contains at c	indicate (other address to anten appro	to a comp, of this form to to account	
	Scurlock Oil Company 428 Mid America Bldg., Midland, Texas, 79701				
	Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent			wed copy of this form is to be sent)	
	Phillips Petroleum Com	npany	Bartlesville, Oklahoma	Bartlesville, Oklahoma	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		nen	
	give location of tanks.	L 14 17S 28E	Yes	12-17-62	
		<u> </u>		And Andrew State of the State o	
	COMPLETION DATA	th that from any other lease or pool,	give comminging order number:		
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Besignate Type of Completic				
	B-1	I Date Could Dead to Dead	Total Depth	I D D T D	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
				1 .	
		TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
			<del>                                     </del>		
				<del>                                     </del>	
V.	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after accovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Astual Dead Dusts - To-4	OM-Bbls.	Water - Bbls.	Gas-MCF	
	Actual Prod. During Test	- Bbis.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	l				
	GAS WELL				
	Actual Prod. Test MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. Test MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condendate	

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.

**Exploration Manager** 

(Title)

February 26, 1968

(Date)

OIL CONSERVATION COMMISSION

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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.