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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-111
Effective 1-1-65

RECEIVED

JUN 28 1982

O. C. D.
ARTESIA, OFFICE

Operator Hanson Operating Company, Inc.	
Address P. O. Box 1515, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change In Transporter of: Effective July 1, 1982
Recompletion ☐	Oil ☐ Dry Gas ☐ Change Operator name from:
Change In Ownership ☐	Casinghead Gas ☐ Condensate ☐ Hanson Oil Corporation
P. O. Box 1515, Roswell, NM 88201	
change of ownership give name and address of previous owner	

DESCRIPTION OF WELL AND LEASE

Lease Name H & K Federal	Well No. 1	Pool Name, including Formation Red Lake Queen Grayburg, SA	Kind of Lease State, Federal or Free Federal	Lease No. LC-068712
Location Unit Letter E ; 2310 Feet From The North Line and 330 Feet From The EWL				
Line of Section 14 Township 17-S Range 28-E, NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (give address to which approved copy of this form is to be sent)
The Permian Corporation Permian (Eff. 9/1/87)	P. O. Box 1183 - Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (give address to which approved copy of this form is to be sent)
Well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. No.
E 14 17-S 28-E	No

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 ☐ Both ☐ Other ☐	Test Depth	Test Interval
Date Spudded	Date Compl. Ready to Prod.	Test Depth	Test Interval
Deviation (DF, RZS, RT, CR, etc.)	Name of Producing Formation	Test Depth	Test Interval
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 (Pump, pump, gas lift, etc.)	
Length of Test	Testing Pressure	Casing Pressure	Coke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Gas - Bbls. MCF/D	Gravity of Condensate
Testing Method (piston, back pr.)	Testing Pressure (Gauge-in)	Casing Pressure (Gauge-in)	Coke Size

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.

OIL CONSERVATION COMMISSION

APPROVED JUL 28 1982

BY *M. Williams*

TITLE OIL AND GAS INSPECTOR

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 is to be accompanied by a translation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowance on new and re-completed wells.

Fill in only Sections I, II, III, and VI for change of owner, well name or location, or transporter or other such change of condition.

Production Analyst

(Title)

(Date)

