

NO. OF COPIES RECEIVED 5
DISTRIBUTION
SANTA FE 1
FILE 1
O.C.S.S.
LAND OFFICE
TRANSPORTER OIL 1
GAS 1
OPERATOR 1
PRODUCTION 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

RECEIVED

OCT 1 1965

RECEIVED

I. Ernest A. Hanson
P. O. Box 1515, Roswell, New Mexico
Reason for filing (check proper box) Change in Transporter or Other (Please explain)
Change in Operator
If change of operator give name and address of previous operator: Ernest A. Hanson & Harold Kersey

II. DESCRIPTION OF WELL AND LEASE
Lease Name Hanson State Well No. 2 Well Name, including Formation Antesita - Grayburg Fm. Kind of Lease State
Location County
Unit Letter H 2310 Feet From The North Line and 990 Feet From The East Line
Line of Section 3 Township 18 South Range 28 East NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil X or Condensate Continental Oil Company Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 1267, Ponca City, Oklahoma
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas Phillips Petroleum Company 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 H Sec. 3 Twp. 18S Rge. 28E Is gas actually collected? When

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 Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded Date Compl. ready to prod. Total Depth PLD/TD
Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

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)
Time First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
Length of Test Tubing Pressure Casing Pressure Choke Size
Amount Produced During Test Oil-Bbls. Water-Bbls. Gas-MCF
GAS WELL
Amount Produced Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Casing Pressure (pilot, 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
September 29, 1965 (Date)
OIL CONSERVATION COMMISSION
APPROVED 1965
BY M. L. Armstrong
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 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.