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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

DEC 9 1971

Operator Hanson Oil Corporation		O.C.C. ARTESIA, OFFICE
Address P. O. Box 1515 - Roswell, New Mexico 88201		
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input type="checkbox"/>		Other (Please explain) CASINGHEAD GAS MUST NOT BE FLARED AFTER 1-18-72 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED <i>NFO Permit # 2-61 Express 2-5-72 # 2-64 4-5-72</i>
If change of ownership give name and address of previous owner _____		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ginsberg Federal	Well No. 8	Pool Name, including Formation Shugart-Yates, 7 Rivers, Queen & Grayburg	Kind of Lease State, Federal or Fee Federal	Lease No. NM025503
Location Unit Letter PA : 330 Feet From The North Line and 330 Feet From The East Line of Section 26 Township 18S Range 30E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 26
	Twp. 18S	Rge. 30E
	Is gas actually connected? No	
	When ASAP	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 10-29-71	Date Compl. Ready to Prod. 11-15-71		Total Depth 3550		P.B.T.D. 3545			
Elevations (DF, RKB, RT, GR, etc.) 3508.9 GL	Name of Producing Formation Queen-Grayburg		Top Oil/Gas Pay 3187		Tubing Depth 3160			
Perforations 3 JPF @ 3187-3191' 3 JPF @ 3461-3465'					Depth Casing Shoe 3545			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	12-3/4"		704'		600 sx-Circulated			
11"	8-5/8" cut + pulled 1508'		1748'		50 sx			
7-7/8"	5-1/2"		3545'		150 sx-100 sx thru 1" to surface			

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 Tanks 11-18-71	Date of Test 11-19-71	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size 2"
Actual Prod. During Test	Oil-Bbls. 81 BO	Water-Bble. 19 BLW	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	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.

Gerald E. Harrington
(Signature)

Geologist

(Title)

December 8, 1971

(Date)

OIL CONSERVATION COMMISSION

APPROVED **DEC 10 1971**, 19____

BY *W. A. Gressett*
OIL AND GAS INSPECTOR

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 only Sections I, II, III, and VI 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.