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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

JAN 28 1972

Operator Hanson Oil Corporation		C. E. O. ARIZONA OFFICE	
Address P. O. Box 1515 - Roswell, New Mexico 88201			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	CASINGHEAD GAS MUST NOT BE FLARED AFTER 3-26-72 UNLESS AN EXCEPTION TO 1-1-65 IS OBTAINED 6-2-68	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Louise B. Benson	Well No. 1	Pool Name, including Formation Rivers, Queen, Shugart, Grayburg	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter J ; 2310 Feet From The South Line and 1650 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 J	Sec. 26	Twp. 18S	Rge. 30E	Is gas actually connected? No	When As soon as possible

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-8-72	Date Compl. Ready to Prod. 1-26-72		Total Depth 3534'		P.B.T.D. 3532'			
Elevations (DF, RKB, RT, GR, etc.) 3473.8 GL	Name of Producing Formation Queen Grayburg		Top Oil/Gas Pay 3163'		Tubing Depth 3197.69'			
Perforations 3163-3167' 3446-3452'					Depth Casing Shoe 3534'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		715'		300sx + 3 yds ready mix			
7-7/8"	5-1/2"		3534'		350 sx			
		2 3/8"		3198				

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 1-26-72	Date of Test 1-27-72	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size 2"
Actual Prod. During Test	Oil-Bbls. 88	Water-Bbls. 12 BLW	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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)

Jan. 27, 1972

(Date)

OIL CONSERVATION COMMISSION

JAN 28 1972

APPROVED

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.

INCLINATION REPORT

OPERATOR Hanson Oil Corporation ADDRESS P. O. Box 1515 - Roswell, N. M. 88201

LEASE Louise B. Benson WELL NO. 1 FIELD Shugart

LOCATION 2310' FSL & 1650' FEL, Sec. 26, T-18-S, R-30-E, Eddy County, N. M.

Depth	Angle (Inclination 'degrees)	Displacement	Displacement Accumulated
400'	1/2 (.00873)	3.47	3.49
700'	1/2 (.00873)	2.62	6.11
900'	3/4 (.01309)	2.08	8.19
1300'	3/4 (.01309)	5.24	13.43
1700'	1 (.01745)	6.98	20.41
2200'	1 1/4 (.02181)	10.91	31.32
2590'	1 (.01745)	6.81	38.13
2841'	1 (.01745)	4.38	42.51
3123'	1 1/4 (.02181)	6.15	48.66
3530'	1 1/2 (.02618)	10.66	59.32

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

Hanson Oil Corporation

Title: Geologist

By: Gerald E. Harrington

Affidavit:

Before me, the undersigned authority, appeared Gerald E. Harrington known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

Gerald E. Harrington
(Affiant's Signature)

Sworn and subscribed to in my presence on this the 27th day of January, 1972.

Emilia Lueker
Notary Public

Seal

My Commission Expires:

Nov. 4, 1973

RECEIVED
JAN 28 1972
O. D. B.
ARTESIA, OFFICE