

**AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Effective 1-1-65

REGISTRATION OFFICE	1	2
TRANSPORTER		
OPERATOR		
REGISTRATION OFFICE		

RECEIVED

AUG 4 1982

**O. C. D.
ARTESIA, OFFICE**

Hanson Operating Company, Inc.

P. O. Box 1515, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

Well	☐	Change in Transporter of:	
Completion	☐	Oil	☒
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Change (If leave explain) Effective July 1, 1982

Change Operator Name from:
Hanson Oil Corporation
P. O. Box 1515, Roswell, New Mexico 88201

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name Ginsberg Federal Battery #3	Well No. 12	Pool Name, Including Formation Shugart	Kind of Lease State, Federal or Fee Federal	Lease No. NM- 025503
Well Letter 0	810	Feet From The South	Line and 1700	Feet From The East
Line of Section 26	Township 18-S	Range 30-E	NEED, Eddy	County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil (X) or Condensate	Address (Give address to which approved copy of this form is to be sent)
Permian Corporation	P. O. Box 1183 - Houston, TX 77001
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)
Phillips Petroleum Company	4001 Penbrook Street - Odessa, TX 79762
Well produces oil or liquids, Location of tanks. OLS 87	Is gas vented or flared? When
Unit J	Sec. 26
Twp. 18-S	Range 30-E
Yes	6/14/72

Is production commingled with that from any other lease or pool, give commingling order number

PRODUCTION DATA

Designate Type of Completion -- (X)	Oil Well	Gas Well	Flow Well	Water Well	Other	PLD Bank	Water Heated	Oil Heated
Spud Date	Date Compl. Ready to Prod.	Total Depth				P.B.T.D.		
Conditions (OF, RKB, RT, CR, etc.)	Name of Producing Formation	Top of Oil Column				Tubing Depth		
Conditions				Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of fluid oil and must be equal to or exceed top allowable for this depth or be for full test hole)

First New Oil Run To Tanks	Date of Test	Pressure (psi) at 100 ft. (gauge)	Flow Rate (bbl/day)
Depth of Test	Tubing Pressure	Casing Pressure	Casing Size
Shut-In Casing Test	Shut-In Pressure	Shut-In Temperature	Shut-In Time

WELL

Well Name	Length of Test	Gravity of Condensate
Well Depth (feet, each part)	Tubing Head (inches)	Casing Head (inches)

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 is true and complete to the best of my knowledge and belief.

OIL CONSERVATION COMMISSION

AUG 5 1982

APPROVED: _____, 19

BY: **Thomas W. Walker**

SUPERVISOR, DISTRICT II

FILED: _____

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 survey taken on the well in accordance with RULE 1111.

[Signature]
(Signature)