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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

MAR 1 1973

Operator HANAGAN PETROLEUM CORPORATION		O. C. C. ARTESIA, N.M.	
Address P. O. Box 1737, Roswell, New Mexico 88201			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name  
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Nan-Bet Com	Well No. 1	Pool Name, including Formation Catclaw Draw Morrow	Kind of Lease State, Federal or Fee	Lease No. L-6815
Location Unit Letter E, 1980 Feet From The North Line and 660 Feet From The West Line of Section 19 Township 21S Range 26E, NMPM, Eddy County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
The Permian Corporation	P. O. Box 3119, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Southern Union Gas Company	Fidelity Union Tower, Dallas, Texas 75201	
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 19
	Twp. 21S	Rge. 26E
	Is gas actually connected? When yes 3-26-73	

If this production is commingled with that from any other lease or pool, give commingling order number: Com. Agr. SW-650

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 4/6/72	Date Compl. Ready to Prod. 6/1/72	Total Depth 10904	P.B.T.D. 10844					
Elevations (DF, RKB, RT, GR, etc.) 3375 KB	Name of Producing Formation Morrow	Top Oil/Gas Pay 10648	Tubing Depth 10466					
Perforations 10648-10664	Depth Casing Shoe 10904							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
17-1/2	13-3/8	490		500 circ.				
12-1/4 & 11	8-5/8	1894		750 circ.				
7-7/8	5-1/2	10904		300				
	2-7/8	10466						

IV. 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 (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 84,000 Natural	Length of Test 4 hrs.	Bbls. Condensate/MMCF Dry	Gravity of Condensate
Testing Method (pilot, back pr.) Positive chokes	Tubing Pressure (Shut-in) 3504 DWT	Casing Pressure (Shut-in) Packer	Choke Size Varies (4)

V. 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.

Philip C. Hanagan  
(Signature)  
Vice President  
(Title)  
2/23/73  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED MAR 29 1973  
BY W. A. Gussitt  
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 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.