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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/>
	GAS <input type="checkbox"/>
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMM. ON
REQUEST FOR ALLOWABLE
RECEIVED AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
DEC 14 1972

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

Operator Hanagan Petroleum Corporation	
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"/> 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

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Lease Name	Catclaw Draw Unit	5	Catclaw Draw Morrow	State, Federal or Fee Federal	NM-
Location	Unit Letter 'G' 1650 Feet From The North Line and 1980 Feet From The East				0374057-A
Line of Section	25	Township	21S	Range	25E
				NMPM,	Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	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"/>	Liano, Inc.	P.O.Box 1320, Hobbs, New Mexico 88240	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 25	Twp. 21S
		Rge. 25E	Is gas actually connected? Yes
			When 12/9/72

If this production is commingled with that from any other lease or pool, give commingling order number: Fed.-St.Unit Order R408

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)			X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
8/1/72	10/28/72	11000		10879					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
3514 KB	Morrow	10670		10570					
Perforations		Depth Casing Shoe							
10872-76'; 10670-78; 10684-92 & 10713-22		11000							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
17-1/2	13-3/8	350		350 sx + 16 yds.					
11 & 12-1/4	8-5/8	2000		800 sx.					
7-7/8	5-1/2	11000		300 sx.					
	2-7/8	10570							

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	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		Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	
0.05 MCF/D	4 hrs.	Dry	
Tubing Pressure (shut-in)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
2955	2955	Packer	Varies (4)

VI. CERTIFICATION 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.

Robert P. Hanagan
(Signature)
President
(Title)
12/13/72
(Date)

OIL CONSERVATION COMMISSION
APPROVED DEC 14 1972
BY W. A. Grissett
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 allowable tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for change 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 multiple completed wells.