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NEW MEXICO OIL CONSERVATION COMMISS
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 16 1974

Operator Hanagan Petroleum Corporation		O. C. C. ARTESIA, OFFICE	
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:	Will be split gas con-	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	nection - Southern Union Gas Co. - 1400	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Fidelity Union Tower - Dallas, TX 75201	
		(SUG has not connected yet, but should soon).	
If change of ownership give name and address of previous owner			

Lease Name Ocotillo Hills		Well No. 1	Pool Name, Including Formation Avalon Morrow	Kind of Lease State, Federal or Fee	State	Lease No. K-4193
Location						
Unit Letter	F	1650	Feet From The	North	Line and	1650
			Feet From The	West		
Line of Section	21	Township	21 South	Range	26 East	NMPM, Eddy
						County

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)			
Navajo Crude Oil Pruchasing Company				P. O. Box 175 - Artesia, New Mexico 88210			
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)			
Llano, Inc.				P. O. Box 1320 - Hobbs, New Mexico 88240			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When	
	F	21	21S	26E	Yes	12-16-74	11/11/74
If this production is commingled with that from any other lease or pool, give commingling order number:					SW935 (10/21/74)		

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	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
4/10/74	6/6/74		11,158'			11,117'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
3284 KB	Morrow		10,929'			10,796'			
Perforations						Depth Casing Shoe			
10,929, 31, 35, 37, 39, 62, 64, 74, 76, & 78						11,158			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
20"		16"		250		Circ. 250 + 14 yds.			
14-3/4" & 12-1/2"		9-5/8"		2600		Circ. 1615 sx.			
8-1/2" & 7-7/8"		5-1/2"		11,158		845 sx. - (2 stage)			
		2-7/8"		10,796		T/cmt. - 7100'			

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
CAOF 8,800 MCF	4 hours	-----	-----
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Positive choke	3506#	Packer	Varies

I. 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.

Hugh C. Hanagan
(Signature)
Vice President
(Title)
12/2/74
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 16 1974

BY W. A. Everett

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.