

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		/
FILE		/
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		/
PRODUCTION OFFICE		/

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes OIL C-104 and C-1
Effective 1-1-65

RECEIVED

SEP 20 1978

Operator
Hanagan Petroleum Corporation ✓

Address
P. O. Box 1737, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name North Fork Com.	Well No. 1	Pool Name, Including Formation Catclaw Draw Wolfcamp Gas	Kind of Lease State, Federal or Fee State	Lease No. I-775
Location Unit Letter C ; 660 Feet From The North Line and 1980 Feet From The West Line of Section 2 Township 22S Range 25E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) Box 175 Artesia, New Mexico 88210			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Llano, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 1320 Hobbs, New Mexico 88240			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 2	Twp. 22S	Rge. 25E
				Is gas actually connected? When Yes 10-3-78

If this production is commingled with that from any other lease or pool, give commingling order number: Com. 9-28-76

IV. 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 3/1/76	Date Compl. Ready to Prod. 5/12/76	Total Depth 10900	P.B.T.D. 10595					
Elevations (DF, RKB, RT, GR, etc.) 3575 KB	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 8660	Tubing Depth 8550					
Perforations 8660 - 8701	Depth Casing Shoe 10900							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17	13 3/8		150		150 Circ.			
12 1/4 & 11	8 5/8		2280		800 Circ.			
7 7/8	5 1/2		10900		820			

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

Actual Prod. Test-MCF/D CAOF 1235 MCF	Length of Test 4 Hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Pos. Chokes	Tubing Pressure (Shut-in) 2356	Casing Pressure (Shut-in) Packer	Choke Size Varies

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.

Gary Courtney
(Signature)
Gary P. Courtney - Controller
(Title)
September 15, 1978
(Date)

OIL CONSERVATION COMMISSION
APPROVED OCT 6 1978
BY W. A. Gussert
TITLE SUPERVISOR, DISTRICT II

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.