

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator HANLEY PETROLEUM INC.	Well API No. 30-015-27431
Address 415 W. Wall, Suite 1500, Midland, Texas 79701	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> 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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Union 35 Federal	Well No. 4	Pool Name, Including Formation Herradura Bend Delaware, East	Kind of Lease State, (Federal) or Fee	Lease No. NM 19601
Location Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West Line Section 35 Township 22-S Range 28-E , NMPM , Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Scurlock - Permian	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX 77251					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Continental Natural Gas, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 21470, Tulsa, OK 74121					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 35	Twp. 22S	Rge. 28E	Is gas actually connected? Yes	When? 6/9/93

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 5/13/93	Date Compl. Ready to Prod. 5/29/93		Total Depth 8500'		P.B.T.D. 8492'			
Elevations (DF, RKB, RT, GR, etc.) 3058 Gr	Name of Producing Formation Delaware		Top Oil/Gas Pay 5928'		Tubing Depth 6272'			
Perforations 5928 - 6101 80 holes - .41" diam.					Depth Casing Shoe 8500'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8" 24#		462		320 Sx Post 10-2			
7 7/8"	4 1/2" 11.60#		8500		2202 Sx 7-25-92			
					camp & PK			

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.)

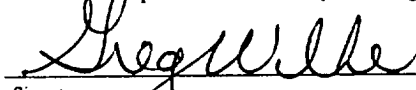
Date First New Oil Run To Tank 6/12/93	Date of Test 6/13/93	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure 40	Casing Pressure 75	Choke Size 1"
Actual Prod. During Test	Oil - Bbls. 41	Water - Bbls. 200	Gas- MCF 30

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


Signature **Greg Wilkes** Chief Engineer
Printed Name **6/22/93** Title **915/684-8051**
Date Telephone No.

OIL CONSERVATION DIVISION

JUN 30 1993

Date Approved
By **ORIGINAL SIGNED BY**
MIKE WILLIAMS
Title **SUPERVISOR, DISTRICT II**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.