

OIL CONSERVATION DIVISION

P. O. BOX 2086

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

TO BE FILLED BY THE
LAND OFFICE
TRANSPORTER
OPERATOR
PRODUCTION OFFICE

Operator
Tesoro Petroleum CorporationAddress
633 17th St., Suite 2000, Denver, CO 80202

Reason(s) for filing (check proper box)

New Well ☐ Change in Transporter of ☒ Oil ☒ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hanson	Well No. 37	Producing Formation Hospah Upper Sand South	Kind of Lease State, Federal or Free Federal	Lease 05293
Location Unit Letter M	1217	Feet from The South	Line and 705	Feet From The West
Line of Section 6	Township 17N	Range 8W	McKinley	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Ciniza Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 1887, Bloomfield, NM 87413			
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks. Unit K	Feet 6	Twp. 17N	Range 8W	Is gas actually connected? When

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Hole
Date Spudded	Date Compl. ready to Prod.	Total Depth	P.B.T.D.				
Elevations (ft. N, E, S, W, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
Perforations	Depth Casing Shoe						

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 of hole for this depth or be for full 24 hours)

Date First New Oil Run to Tanks	Date of Test	Producing Method (Pump, Gas Lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
		Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (Pump, Gas Lift, etc.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size

VI. 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.

District Operations Manager

5/15/82

OIL CONSERVATION DIVISION

MAY 24 1982

APPROVED

Original Signed by CHARLES GHOLSON

BY

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

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 depth tests taken on the well in accordance with RULE 1104.

All sections of this form must be filled out completely for all new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of ownership, number, or transporter, or other such change of conditions.

Separate Forms C-104 must be filed for each pool in multi-completed wells.