

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

ARTESIA OFFICE

Operator Hanson Operating Company, Inc. ✓	Well API No. 30-005-62685
Address P. O. Box 1515, Roswell, New Mexico 88202-1515	
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 Hanlad "A" State Battery #1	Well No. 7	Pool Name, Including Formation Diablo San Andres	Kind of Lease State, Federal or Private	Lease No. LG-7426
Location Unit Letter <u>G</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>East</u> Line Section <u>28</u> Township <u>10S</u> Range <u>27E</u> , <u>NMPM</u> , <u>Chaves</u> 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"/> Permian	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77251-1183	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> N/A	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 I	Sec. 28
	Twp. 10S	Rge. 27E
	Is gas actually connected? No	
	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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 04/01/89	Date Compl. Ready to Prod. 05/14/89		Total Depth 2090'		P.B.T.D. 2070'			
Elevations (DF, RKB, RT, GR, etc.) 3816' GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 1982'		Tubing Depth 2057'			
Perforations 1982, 83, 84, 85, 86, 92, 93, 94, 99, 2011, 12, 13, 16, 17, 18, 32, 34, 36, 37, 48, 49, 50, 51, 52'					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	520'	200 sx Lite, 200 sx "C"
8"	5-1/2"	2090'	150 sx Lite, 200 sx "C"
	Tubing- 2-3/8"	2057'	Post ID-2 6-16-89 camp & BR

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 05/14/89	Date of Test 05/15/89	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 45	Water - Bbls. 0	Gas- MCF 40 (889/1)

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
Brenda R. Godfrey, Production Analyst

Printed Name
06/08/89

Date

Title
505-622-7330

Telephone No.

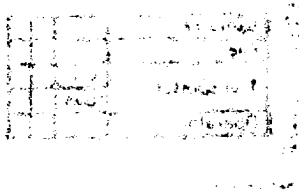
OIL CONSERVATION DIVISION

JUN 14 1989

Date Approved

By
ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

Title



1870

1870