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1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

RECEIVED

FEB 21 '90

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Hanson Operating Company, Inc. ✓ Well API No. 30-005-82891
Address P.O. Box 1515, Roswell, New Mexico 88202
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Operator ☒ Casinghead Gas ☐ Condensate ☐
If change of operator give name and address of previous operator BHP Petroleum Co., Inc., 5847 San Felipe, Suite 3600, Houston, TX 77057

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Yates Valley State Com</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Wildcat San Andres</u>	Kind of Lease (State) Federal or Fee <u>State</u>	Lease No. <u>V-1363</u>
Location Unit Letter <u>G</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>East</u> Line Section <u>36</u> Township <u>10S</u> Range <u>26E</u> , <u>NMPL</u> Chaves County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)	
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	Sec.
	Twp.	Rgn.
	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 Res'v	Diff Res'v
Date Spudded <u>05/18/89</u>	Date Compl. Ready to Prod. <u>06/28/89</u>	Total Depth <u>6711'</u>		P.B.T.D. <u>2370'</u>				
Elevations (DF, RKB, RT, CR, etc.) <u>3716' GR</u>	Name of Producing Formation <u>San Andres</u>		Top Oil/Gas Pay <u>1742'</u>		Tubing Depth <u>2450'</u>			
Performances <u>2204-18', 1822-48', 1742-84'</u>			Depth Casing Shoe <u>2450'</u>					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>7-7/8"</u>	<u>5-1/2"</u>	<u>2450</u>	<u>125 sx Lite, 225 sx C</u>
	<u>2-3/8"</u>	<u>2227</u>	<u>Port ID-3</u>
			<u>3-9-90</u>
			<u>chg ap.</u>

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 <u>N/A</u>	Date of Test <u>01/06/90</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pumping</u>	
Length of Test <u>24 hrs.</u>	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. <u>0</u>	Water - Bbls. <u>10</u>	Gas - MCF <u>TSTM</u>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pump, 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.

Brenda R. Godfrey
Signature
Brenda R. Godfrey Production Analyst
Printed Name
02/13/90 Title
Date 505-622-7330
Telephone No.

OIL CONSERVATION DIVISION

FEB 28 1990

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.