

**REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Superseded Old C-101 and C-1  
Effective 1-1-65

FILE	
S.G.S.	
AND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
REGISTRATION OFFICE	
PROTOR	

**RECEIVED**  
**JUN 28 1982**

**O. C. D.**  
**ARTESIA, OFFICE**

Hanson Operating Company, Inc.  
P. O. Box 1515, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

New Well <input type="checkbox"/>	Change in Transporter of:	Other (Please explain) Effective July 1, 1982
Completion <input type="checkbox"/>	Oil <input type="checkbox"/>	Change Operator Name From:
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Hanson Oil Corporation
	Dry Gas <input type="checkbox"/>	P. O. Box 1515, Roswell, NM 88201
	Condensate <input type="checkbox"/>	

Change of ownership give name  
address of previous owner

**DESCRIPTION OF WELL AND LEASE**

Well No. <b>10</b>	Pool Name, including Formation <b>North Mason Delaware</b>	Kind of Lease <b>Federal</b>	Lease No. <b>068282-B</b>
Unit Letter <b>F</b>	Feet From The <b>North</b> Line and <b>1650</b>	Feet From The <b>West</b>	
Line of Section <b>25</b>	Township <b>26-S</b>	Range <b>31-E</b>	County <b>Eddy</b>

**SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (this address to which approved copy of this form is to be sent)
<b>Western Oil Transportation Co., Inc.</b>	<b>P. O. Box 1131 - Houston, TX 77001</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (this address to which approved copy of this form is to be sent)
<b>Phillips Petroleum, Co.</b>	<b>4001 Penbrook Street - Odessa, TX 77001</b>
Well produces oil or liquids, location of tanks.	Date of Production <b>February 1, 1960</b>
Unit <b>F</b> Sec. <b>25</b> Twp. <b>26-S</b> Rng. <b>31-E</b>	

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

**PRODUCTION DATA**

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	Perforated <input type="checkbox"/>	Deepwell <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Case tested <input type="checkbox"/>	Other <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.	Test Depth	P.B.T.D.				
Locations (OS, RNB, RT, CR, etc.)	Name of Producing Formation	Test Oil Gravity	casing Depth				
Locations			Depth Casing Shoe				

**TUBING, CASING, AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

**TEST DATA AND REQUEST FOR ALLOWABLE WELL**

(Test must be after test is run and allowable for this depth or be for full depth)

First New Oil Run To Tanks	Date of Test	Production (oil, gas, etc.)	Case Size
Depth of Test	Tubing Pressure	Case Pressure	Case Size
Oil Prod. During Test	Oil-80%	Water Prod.	Case-MCF

*Tested 7-30-82*

**WELL**

Oil Prod. Test-MCF/D	Length of Test	Water Prod. (gals)	Quantity of Condensate
Case Pressure (psig, back psi)	Tubing Pressure (psig-in)	Case Pressure (psig-in)	Case Size

**CERTIFICATE OF COMPLIANCE**

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

*[Signature]*  
Production Analyst  
(Title)

*6/25/82*  
(Date)

**OIL CONSERVATION COMMISSION**  
**June 1982**

APPROVED BY *Mike Williams*  
**OIL AND GAS INSPECTOR**

This form is to be filed in compliance with 100.11, 110.4.  
If this well is 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 100.11.  
All wells on this form must be filled out completely for allowable production purposes.  
This form is to be filed in 1, II, III, and VI (or change of name), with any change in transporter or other such change of condition.