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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS.

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

HOBBS OFFICE
MAY 15 10 39 AM '69

I. Operator
Roger C. Hanks
Address
606 Wall Tower West, Midland, Texas 79701
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sinclair-State	Well No. 1	Pool Name, Including Formation Undesignated Bar u-Pennsy R-3802	Kind of Lease State, Federal or Fee State	Lease No. 5201
Location Unit Letter D ; 660 Feet From The North Line and 660 Feet From The West Line of Section 12 Township 9S Range 32E , NMPM, Lea 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"/> Mobil Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service Oil Company	Address (Give address to which approved copy of this form is to be sent) Tulsa, Oklahoma 74101			
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 12	Twp. 9S	Rge. 32E
Is gas actually connected?		When		
No		Within thirty days		

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	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 3-5-69	Date Compl. Ready to Prod. 5-1-69	Total Depth 9220'	P.B.T.D. 9220'					
Elevations (DF, RKB, RT, GR, etc.) 4418' GR	Name of Producing Formation Bough "C"	Top Oil/Gas Pay 9128'	Tubing Depth 9095'					
Perforations 9128-44		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
15"	13 3/8"	385'		400sx.				
11"	8 5/8"	3646'		350 sx.				
7 7/8"	5 1/2"	9120'		400 sx.				

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)

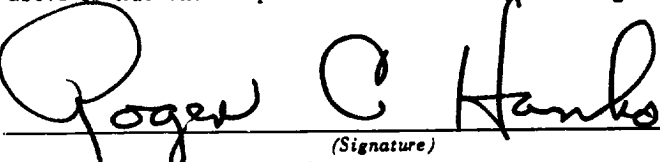
Date First New Oil Run To Tanks 5-1-69	Date of Test 5-12-69	Producing Method (Flow, pump, gas lift, etc.) Hyd Kobe 4" X 2 3/8" X 2 3/8"	
Length of Test 24 hours	Tubing Pressure Kobe	Casing Pressure Kobe	Choke Size 64/64
Actual Prod. During Test 976 bbls. fluid	Oil-Bbls. 312	Water-Bbls. 664	Gas-MCF Est 200 MCF

GAS WELL

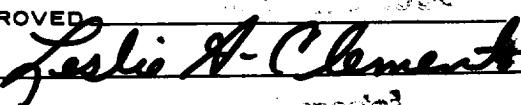
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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


(Signature)
Owner
(Title)
May 13, 1969
(Date)

OIL CONSERVATION COMMISSION

APPROVED
BY 
TITLE

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 deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.