

DISTRIBUTION	
SALES	
FILE	
USE	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION 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

Operator HANSON OIL CORPORATION	
Address P.O. Box 1515, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	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 Ownership <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

I. DESCRIPTION OF WELL AND LEASE				
Lease Name Amoco State	Well No. 2	Pool Name, Including Formation Vada Penn	Kind of Lease State, Federal or Fee State	Lease No. K-6657
Location Unit Letter <u>A</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>510</u> Feet From The <u>East</u>				
Line of Section <u>10</u> Township <u>9-S</u> Range <u>33-E</u> , NMPM, <u>Lea</u> County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119 Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1589 Tulsa, Oklahoma 74001					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 2	Twp. 9-S	Rge. 33-E	Is gas actually connected? yes	When July 1975

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

III. 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 Reservoir <input type="checkbox"/> Diff. Reservoir <input type="checkbox"/>		
Date Spudded 1-10-75	Date Compl. Ready to Prod. 3-27-75	Total Depth 9561'	P.B.T.D.
Elevations (DF, RLB, RT, GR, etc.) 4362 GL	Name of Producing Formation Bough "C"	Top Oil/Gas Pay 9505'	Tubing Depth 9545'
Perforations 9505'- 9525', 21 shots 1 hole per foot			Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	12 3/4" 37.5#	420'	300 sx. circ.
11"	8 5/8" 32# & 24#	3828'	450 sx.
7 7/8"	5 1/2"	9561'	225 sx.
	2 3/8"	9545'	

IV. 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 3-27-75	Date of Test 2-1-76	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 150 bbls.	Oil-Bbls. 75 bbls.	Water-Bbls. 75 bbls.	Gas-MCF 10 MCF

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

V. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED <u>Feb 4 1976</u> , 19__	
<u>Ray Wilk</u> (Signature)		BY <u>Jerry Smith</u>	
Vice President-Production (Title)		TITLE <u>SUPPLY</u>	
February 10, 1976 (Date)		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.	