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	GAS	
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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 ROGER C. HANKS		
Address 606 Wall Towers West, Midland, Texas 79701		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	CASINGHEAD GAS CONNECTION
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

Lease Name BRAG-Federal		Well No. 1-Y	Pool Name, including Formation Vada-Pennsylvanian South Prairie Cisco (Bough)	Kind of Lease State, Federal or Fee Federal	Lease No. NM 9033
Location Unit Letter E, 1830 Feet From The North Line and 660 Feet From The West Line of Section 28 Township 8S Range 36E, NMPM, Roosevelt County					


Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mobil Pipe Line 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) Box 300, Tulsa, Oklahoma 74102				
If well produces oil or liquids, give location of tanks.	Unit -E	Sec. 28	Twp. 8S	Rge. 36E	Is gas actually connected? Yes	When December 17, 1969

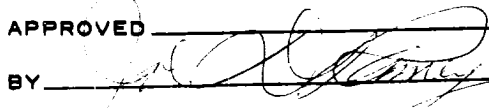
If this production is commingled with that from any other lease or pool, give commingling order number:

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Perforations			Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			

Date First New Oil Run To Tanks		Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF	

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)	
Operator	
(Title)	
February 18, 1970	
(Date)	

OIL CONSERVATION COMMISSION	
APPROVED	19
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.	