

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

Operator <b>HANSON OPERATING CO. INC.</b>	Well API No. <b>30-041-20863</b> ✓
Address <b>P.O. Box 1515 Roswell, New Mexico 88201</b>	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)
Change in Operator <input type="checkbox"/>	
If change of operator give name and address of previous operator	

**II. DESCRIPTION OF WELL AND LEASE**

THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR

Lease Name <b>Junction Federal</b>	NO WAY NCHS OF NAME, Including Formation <b>Allison Penn Bough</b>	Kind of Lease State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> or Fee	Lease No. <b>NM-86945</b>
Location Unit Letter <b>K</b> : <b>1650</b> Feet From The <b>south</b> Line and <b>1650</b> Feet From The <b>west</b> Line Section <b>17</b> Township <b>8-S</b> Range <b>37E</b> , <b>NMPM</b> , <b>Roosevelt</b> County			

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <b>EOTT ENERGY CORP.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 4666, Houston, Texas 77210-4660</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>WARREN PETROLEUM COMPANY</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1150, Midland, Texas 79702-1150</b>
If well produces oil or liquids, give location of tanks. Unit <b>K</b> Sec. <b>17</b> Twp. <b>8S</b> Rge. <b>37E</b>	Is gas actually connected? <b>NO</b> When? <b>30-60 Days</b>

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 <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded <b>2-4-93</b>	Date Compl. Ready to Prod.		Total Depth <b>11935</b>		P.B.T.D. <b>9500'</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>4059' GR</b>	Name of Producing Formation <b>Bough "C"</b>		Top Oil/Gas Pay <b>9438'</b>		Tubing Depth <b>9440'</b>			
Perforations <b>9438-9460</b>					Depth Casing Shoe			

**TUBING, CASING AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<b>17 1/2</b>	<b>13 3/8</b>	<b>495'</b>	<b>200sx Lite, 200sx "C"</b>
<b>12 1/4</b>	<b>8 5/8</b>	<b>4200'</b>	<b>1450sx Lite, 250sx "C"</b>
<b>7 7/8</b>	<b>5 1/2</b>	<b>9500'</b>	<b>1st Stage-500sx Lite, 300sx</b>
			<b>2nd Stage-300sx Lite</b>

**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 <b>4-26-93</b>	Date of Test <b>4-26-93</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pumping</b>	
Length of Test <b>24 hours</b>	Tubing Pressure <b>0</b>	Casing Pressure <b>0</b>	Choke Size <b>0</b>
Actual Prod. During Test <b>78</b>	Oil - Bbls. <b>77</b>	Water - Bbls. <b>1</b>	Gas- MCF <b>150</b>

**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

**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.

Signature David Sweeney  
Printed Name David Sweeney Drilling & Prod. Supt.  
Date April 29, 1993 Title  
Telephone No. 505/622-7330

**OIL CONSERVATION DIVISION**

Date Approved JUN 14 1993

Orig. Signed by Paul Kautz  
By Geologist

Title \_\_\_\_\_

**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.