

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

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

If change of operator give name and address of previous operator

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

II. DESCRIPTION OF WELL AND LEASE		Lease Name	Junction Federal	NO NEW NEIGHBORHOOD NAME, INCLUDING FORMATION	Allison Penn Bough	Kind of Lease	State Federal or Fee	Lease No.	NM-86945
Location									
Unit Letter	K	:	1650	Feet From The	south	Line and	1650	Feet From The	west
Section	17	Township	8-S	Range	37E	NMPM,	Roosevelt	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"/>	Address (Give address to which approved copy of this form is to be sent)				
EOTT ENERGY CORP.		P.O. Box 4666, Houston, Texas 77210-4660				
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
WARREN PETROLEUM COMPANY		P.O. Box 1150, Midland, Texas 79702-1150				
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 17	Twp. 8S	Rge. 37E	Is gas actually connected?	When?
					NO	30-60 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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	2-4-93	Date Compl. Ready to Prod.		Total Depth	11935	P.B.T.D.	9500'	
Elevations (DF, RKB, RT, GR, etc.)	4059' GR	Name of Producing Formation	Bough "C"	Top Oil/Gas Pay	9438'	Tubing Depth	9440'	
Perforations	9438-9460			Depth Casing Shoe				

TUBING, CASING AND CEMENTING RECORD

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

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

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pivot, 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 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.