NO. OF COPIES RECEIVED DISTRIBUTION SANTAFE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL PRORATION OFFICE Operator Hanson Oil Com Address P. O. Box 1515 Reason(s) for filing (Check proper box) New Well Recompiction	REQUEST F AUTHORIZATION TO TRAN upany 5, Roswell, New Mexic	Other (Please es HXI 150	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 NS
Change in Ownership	Casinghead Gas Condens		STIVE APRIL 1, 1970
and address of previous owner	·		
Lease Name Pennzoil Federal Location	EASE Well No. Pool Name, Including For 1 E-K Queen Feet From The South Line	State, Federal	FEGERAL
Unit Letter ; ; ;			_
Line of Section 19 Tow	nship 18-S Range 34	-Е , NMPM,	Lea County
The Permian Corp.		Address (Give address to which approved copy of this form is to be sent) 1509 W. Wall, Midland, Texas Address (Give address to which approved copy of this form is to be sent)	
If well produces on or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	
give location of tar.xs.	N 19 185 34E		Jnknown
If this production is commingled wit COMPLETION DATA	h that from any other lease or pool, g	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completio		X	
Date Spudaed 11-16-69	Date Compl. Ready to Prod. 1-14-70	Total Depth 4800*	P.B.T.D 4772 •
Elevations (DF, RKB, RT, GR, etc., 3960* KB	Name of Producing Formation	Top Oil/Gas Pay 4723*	Tubing Depth 4650
Perforations	+730, 4731 & 4736		Depth Casing Shoe • • • • • • • • • • • • • • • • • • •
1 - 4723, 4729, 4	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
<u>12"</u> 7-7/8"	<u>8-5/8n</u> 5-1/2n	<u>256'</u> 4800'	150 sx. 250 sx.
V. TEST DATA AND REQUEST F OII WELL Date First New Oil Run To Tanks 1-14-70	OR ALLOWABLE (Test must be a) able for this de Date of Test 1-14-70	pth or be for full 24 houre) Producing Method (Flow, pump, gas lif Pumping	
1-14-70 Length of Teet	Tubing Pressure	Casing Presewe	Choke Size
24 hrs. Actual Prod. During Test	Oli-Bble.	Water - Bble.	Gas-MCF
	75	0	<u> </u>
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Tering Method (pitoi, back pr.)	Tubing Pressure (Shut-ia)	Casing Pressure (Shut-im)	Choke Size
I. 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, 19 BY TITLE This form is to be filed in compliance with RULE 1104.	
Hours ? Mehrand		If this is a request for allowable for a newly drilled or deepened	
(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All aections of this form must be filled out completely for allow- able on new and recompleted wells.	
Exec. Vice President (Tule)			
January 30, 1070 (Date)		Fill out only Sections I, I well name or number, or transpor	I, III, and VI for changes of owner, ten or other such change of condition. It be filed for each pool in multiply