

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

## OIL CONSERVATION DIVISION

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

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

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

|   |   |
|---|---|
| Operator<br>Hanley Petroleum Inc.   | Well API No.<br>30 025 31115  |
| Address<br>415 W. Wall, Suite 1500, Midland, Texas 79701                                |   |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) |   |
| New Well <input checked="" type="checkbox"/>  | Change in Transporter of: Request Test Allowable of 900 barrels             |
| 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                        |   |

### II. DESCRIPTION OF WELL AND LEASE

|  |               |  |  |                       |
|--|---------------|--|--|-----------------------|
| Lease Name<br>Hanley 24 Federal  | Well No.<br>1 | Pool Name, Including Formation<br>Querecho Plains- Bone Spr. | Kind of Lease<br>State, Federal or Fee | Lease No.<br>NM 64598 |
| Location<br>Unit Letter L : 2310 Feet From The South Line and 330 Feet From The West Line<br>Section 24 Township 18S Range 32E, NMPM, Lea 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)<br>P.O. Box 1183, Houston, Texas 77251 |
| 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)<br>4001 Penbrook, Odessa, Texas 79701  |
| If well produces oil or liquids, give location of tanks.   | Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When ?   |
|  | L   24   18S   32E   No   |

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<br>12-29-90  | Date Compl. Ready to Prod.<br>2-5-91             | Total Depth<br>8700     | P.B.T.D.<br>8654                             |          |        |                           |            |            |
| Elevations (DF, RKB, RT, GR, etc.)<br>3781  | Name of Producing Formation<br>Upper Bone Spring | Top Oil/Gas Pay<br>8370 | Tubing Depth<br>7685                         |          |        |                           |            |            |
| Perforations<br>8492, 8494, 8520, 8522, 8527, 8539, 8541, 8543, 8545, 8561, 8563, |  |                         | 8565, 8567                                   |          |        | Depth Casing Shoe<br>8700 |            |            |
| TUBING, CASING AND CEMENTING RECORD   |  |                         |  |          |        |                           |            |            |
| HOLE SIZE   | CASING & TUBING SIZE                             | DEPTH SET               | SACKS CEMENT                                 |          |        |                           |            |            |
| 17-1/2  | 13-3/8   | 410                     | 400 circulated                               |          |        |                           |            |            |
| 11  | 8-5/8  | 3015                    | 1125 circulated                              |          |        |                           |            |            |
| 7-7/8   | 4-1/2  | 8700                    | 950 = 980                                    |          |        |                           |            |            |

### 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.)

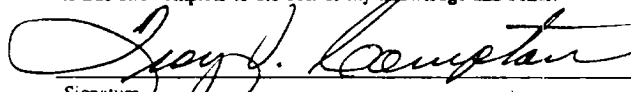
|                                |                 |   |            |
|--------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tank | Date of Test    | Producing Method (Flow, pump, gas lift, etc.) |            |
| Length of Test                 | Tubing Pressure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

### GAS WELL

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D        | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Testing Method (prior, 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  
Troy V. Compton - V.P. Prod.  
Printed Name  
Feb. 5, 1991 (915) 684-8051  
Date Telephone No.

### OIL CONSERVATION DIVISION

Date Approved

By

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.