

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes C-103 and C-105
Effective 1-1-65

JUL 9 11 32 AM '65

LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

Ernest A. Hanson

P. O. Box 1515, Roswell, New Mexico

Reasons for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Improvement	<input type="checkbox"/>	Oil	* <input checked="" type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

ALSO: Change of well no. from
Mescalero Ridge Unit Well #1-35 TO:
Mescalero Ridge Unit -35 Well # 1

If change of ownership give name and address of previous owner *To be effective on date approximately July 15 - will notify when definite

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
Mescalero Ridge Unit 35	1	Pearl Queen	State, Federal or Fee Federal
Location			
Part Letter I	1980'	Feet From The South	Line and 560
		Feet From The East	
Line of Section 35	Township 19 South	Range 34 East	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)
Shell Pipeline Corporation	P. O. Box 1509, Midland, Texas (ATT: Mr. E.D.A.)
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)
Phillips Petroleum Corporation	Bartlesville, Oklahoma
Is well producing oil or liquids, give location of tanks.	Is gas actually connected? When
L 35 19S 34E	Yes

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	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.					
	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

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of fluid oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Time 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.	PROD-MOP

GAS WELL

Actual Prod. Test-MOP/D	Length	Bbls. Gas	Prod. of Condensate
Producing Method (pitot, back pr.)	Time	Casing Pressure	Flow

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.

ERNEST A. HANSON

(Signature)

OWNER

(Title)

July 7, 1965

(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 Sections I, II, III, and VI only 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.