A COUNTY & MECHANIC DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMIS Form C -104 Supersedes Old C-104 and C-11: Effective 1-1-65 REQUEST FOR ALLOWABLE ANDES OFFICE O. C. C. U.5 G.5 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE Aug 11 11 56 AM '67 I RANSPORTER CHANGE IN OPERATOR NAME FROM: OPERATOR CHANGE IN NAME OF OPERATOR HANSON OIL COMPANY FROM: ERNEST A. HANSON HANSON OIL CORPORATION TO: HANSON OIL COMPANY Ernest A. Hanson EFFECTIVE: APRIL 1, 1570 P. O. Box 1515, Roswer Wenden Mark to 1969 Other (Please explain) New Well Perceptation KX thinge to whership Casinghead Gas Condensate If change of ownership give name and address of previous owner ___ II. DESCRIPTION OF WELL AND LEASE Well No. Fool Name, Including Formation Kind of Lease NM 052 State, Federal or Fee Federal Mescalero Ridge Unit Pearl Queen B : 660 Feet From The North Line and 1980 , Township 19 South Ronge 34 East , NMPM, Lea Name of Authorized Transporter of Oil (%) or Condensate Address (Give address to which approved copy of this form is to be sent) Ridge Pipeline Company, Inc.
Name of Authorized Transporter of Casinghead Gas or Dry Gas P. O. Box 1515, Roswell, New Mexico
Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma Phillips Petroleum Company Sec. Twp. Rge. Is gas actually connected? If well produces oil or liquids, give location of tanks. 35 J 19S | 34E Yes If this production is commingled with that from any other lease or pool, give commingling order number: **COMPLETION DATA** Workover Plug Back Same Res'v. Dill. Res' Besignate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth P.B.T.D. Pool Name of Producing Formation Top Oll/Gas Pay Tubing Depth Perforations Death Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT ist be after recovery of total volume of load oil and must be equal to or exceed top allow this depth or b. for full 24 hours.) V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after OIL WELL Date First New Oil Run To Tanks Producing Nathod (Flow, pump, gas lift, etc.) Date of Test Length of Test Tubing Pressy Cosing Pressure Choke Size OH-Bbls. Water - Bbls. Actual Prod. During Test Gda - MCE **GAS WELL** Actual Frod. Test MCF/D Gravity of Condensate Length of Test Bbls. Condensate/MMCF esting Method (pitot, back pr.) Tubing Pressure Casina Pressure Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPROVED 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 heat of my knowledge and belief. BY_ 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. August 9, 1967

Separate Forms C-104 must be filed for each pool in multiply

completed wells.