

NAME OF OPERATOR	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
FEB 2 11 21 AM '67

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. **Ernest A. Hanson**
Address: **P. O. Box 1515, Roswell, New Mexico**
Reason(s) for filing (check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Other (Please explain) ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

UNDESIGNATED

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease
Mescalero Ridge Unit "26"	4	Pearl Queen	State, Federal or Leasing
Location			Fed.
Unit	N	330	Feet From The S Line and 1980 Feet From The W
Line	26	Township 19-S	Range 34-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Designated 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 Pipe Line Corp.	Box 1598, Hobbs, New Mexico
Designated 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 Co.	Bartlesville, Oklahoma
If well produces liquids, give unit, sec., twp., and range	Is gas actually connected? When
P 26 19-S 34-E	No Immediately

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 <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'ty. <input type="checkbox"/> Diff. Res'ty. <input type="checkbox"/>		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.
Jan. 4, 1967	Feb. 1, 1967	5220'	5192'
Pool	Name of Producing Formation	Top Oil/Gas Layer	Tubing Length
Pearl Queen	Queen Fm.	4602'	4550'
Perforations			Depth Casing Shoe
1 - 0.50" jet @ 4602, 4608, 4618, 4627, 4630, 4633, 4635, 4978, 4979, 4980, 4990, 4991 & 4992'			5220'
TUBING, CASING, AND CEMENTING RECORD			
PIPE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	230'	200 sx. circ. to surf.
7-7/8"	5-1/2"	5220'	350 sx.

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 of Test	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Feb. 1, 1967	Feb. 1, 1967	Pumping
Length of Test	Tubing Pressure	Casing Pressure
24 hours		Choke Size
Actual Production Test	Oil - Bbls.	Water - Bbls.
	58	2
		Gas - MCF

GAS WELL

Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Tubing Pressure	Casing Pressure	Choke Size

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.



Exploration Manager

(Title)

February 2, 1967

(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 1111.

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.