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NEW MEXICO OIL CONSERVATION COMMISSION
FOR THE STATE OF NEW MEXICO
AN
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

m C-10
Supersedes Oia 1-16, and
Effective 1-1-58

Operator Ernest A. Hanson	
Address P. O. Box 1515, Roswell, New Mexico	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Lease Name Max Gutman	Well No. 5	Pool Name, Inc. or Formation Unders. Granite Wash	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Wantz-Granite Wash R-4604				
Unit Letter N	540	Feet From The South	Line and 1650	Feet From The West
Line of Section 9	Township 22-S	Range 38-E	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"/> Texas-New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, Oklahoma			
If well produces oil or liquids, give location of tanks. Unit K	Sec. 19	wp. 22S	Rge. 38E	Is gas actually connected? 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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Refrack	Same Res'v.	Diff. Res'v.
Date Spudded 3-16-68	Date Compl. Ready to Prod. 4-20-68	Total Depth 7447'	7419'					
Elevations (DF, RKB, RT, G, etc.) 3358' KB	Name of Producing Formation Granite Wash	Top Oil/Gas Pay 7356'	7300'					
Perforations 1 - 0.50" SPF 7356, 7366, 7373, 7386, 7391'	Casing Shoe 7447'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	1180'	45 SX.					
7-7/8"	5-1/2"	7447'	625 SX.					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after discovery 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 Flow To Tanks 4-20-68	Date of Test 4-20-68	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 8 hours	Tubing Pressure	Casing Pressure	Choke Size 2"
Actual Prod. During Test	Oil-Bbls. 280	Water-Bbls. 0	Gas

GAS WELL			
Actual Prod. /D	Length of Test	Bbls. Condensate/MMCF	Grav. Condensate
Testing Method back	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke

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.

J. F. Hanson
(Signature)
Exploration Manager
(Title)
April 24, 1968
(Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
By **J. F. Hanson**
E

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable on a newly drilled or deepened well, this form must be accompanied by 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 only Sections I, II, III, and VI for changes of well name or number, or transporter or other such change of information.
Separate Forms C-10- must be filed for each pool completed wells.