

REGISTRATION AND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
REGISTRATION OFFICE	

APPLICATION TO TRANSPORT OIL AND NATURAL GAS

ENCL. 1-1-85

Hanson Operating Company, Inc.

Address

P. O. Box 1515, Roswell, New Mexico 88201

Person(s) for filing (Check proper box)

Oil Well ☐	Change in Transporter of:
Completion ☐	Oil ☐
Change in Ownership ☐	Casinghead Gas ☐
	Dry Gas ☐
	Condensate ☐

Other (Please explain)

Effective July 1, 1982,

Change Operator Name from:

Hanson Oil Corporation

P. O. Box 1515, Roswell, NM 88201

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Max Gutman	6	Blinbry & Drinkard	State, Federal or Fee Fee	
Location	Unit Letter	K	1650 Feet From The South Line and 1650 Feet From The West	
Line of Section	19	Township	22-S	Range
			38-E	N.M.P.M.
				Lea
				County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

P&A, 1/22/81

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
Well produces oil or liquids, or location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected?	When

If production is commingled with that from any other lease or pool, give commingling order number: DHC-#308

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Locations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Locations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE

(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)

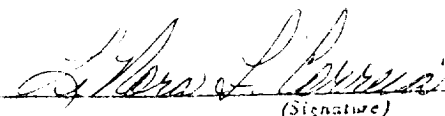
First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Oil Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

TEST WELL

Oil Prod. Test-MCF/D	Length of Test	Bbls. Condensate/Water	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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 is true and complete to the best of my knowledge and belief.



Production Analyst
(Title)

7/20/82

(Date)

OIL CONSERVATION COMMISSION

JUL 23 1982

APPROVED _____, 19__

BY _____

TITLE _____

This form is to be filed in compliance with RULE 110a.

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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.

RECEIVED

JUL 22 1982

HOUSE OFFICE