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

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

I.

Operator Hanson Oil Corporation	
Address P.O. Box 1515, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Max Gutman	Well No. 7	Pool Name, including Formation Blinebry-Tubb	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter D ; 810 Feet From The N Line and 880 Feet From The West					
Line of Section 19 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas, Inc. <i>Texaco, Inc. Texas New Mexico Petroleum</i>	Box 1510, Midland, Texas 79701					
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)					
Warren Petroleum Corp.	Box 1589, Tulsa, Oklahoma 74100					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 19	Twp. 22S	Pge. 38E	Is gas actually connected? Yes	When 10/75

If this production is commingled with that from any other lease or pool, give commingling order number: R-5240

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5/16/75	Date Compl. Ready to Prod. 8/2/75	Total Depth 7475'		P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3328.5 GR	Name of Producing Formation Blinebry-Tubb	Top Oil/Gas Pay 5606'		Tubing Depth 5506'					
Perforations				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"		8-5/8"		1180'		400 sx. circ.			
7-7/8"		5-1/2"		7475'		1400 sx.			
		2-1/16"		5506'					

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 First New Oil Run To Tanks 8-29-75	Date of Test 7-20-76	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 1375	Casing Pressure Packer	Choke Size 18/64
Actual Prod. During Test 43	Oil-Bbls. 35	Water-Bbls. 8	Gas-MCF 375

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	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.

Ray Mills
(Signature)

Vice President/ Production

(Title)

July 27, 1976

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19

BY *[Signature]*

TITLE

This form is to be filed in compliance with RULE 1134.

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.