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Appropriate District Office
District 1
P.O. Roy 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-164 Revised 1-1-89 See Instructions of Return of Pro-

DISTRICT E P.O. Deswer DD, Astonia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION

L.		TO TRA	NSP	ORT OIL	AND NAT	TURAL G	AS				
Орегласт								Well API No.			
Amerada Hess Corporat	30-039-21383										
Drawer D, Monument, N	ew Mex	ico 882	65								
Reason(s) for Filing (Check proper box)					Othe	t (Please expl	lain)				
New Well		Change in					7 1 00				
Recompletion.	Oil Dry Gas Casinghood Gas Condensate					Effective 7-1-90.					
Change in Operator	Camphe	M Ges	Conde	emic		···					
and address of previous operator											
II. DESCRIPTION OF WELL	AND LE	ASE									
Lesse Name		Well No.	Pool N	lame, Includ	ing Formation	······································	Kind	of Lesse	Lo	ase No.	
Jicarilla Apache "I"		6	Wes	<u>t Lindr</u>	ith Gall	allup Dakota		State, Federal or Fee		Cont. 167	
Location	0.0	90		c	a+h	700	`				
Unit Letter	_ :	, , , , , , , , , , , , , , , , , , , 	. Feet P	from The $\frac{3}{2}$	outh Line	and790		eet From The	East	Line	
Section 11 Townshi	_{in} 23	3N	Range	3W	N/A	ирм,	Ri	o Arriba		County	
	<u> </u>				,,,,,,,	711144				County	
III. DESIGNATION OF TRAN	ISPORTI	or Condex		D NATU							
Name of Authorized Transporter of Oil		Address (Give address to which approved copy of this form is to be sent)									
Giant Refining Co. Name of Authorized Transporter of Casinghead Gas X or Dry Gas					P. O. Box 256, Farmington, N.M. 87499 Address (Give address to which approved copy of this form is to be sent)						
Amerada Hess Corporat			or Dry Gas		P. O. Box 2040, Tu						
If well produces oil or liquids,	Unit Sec.		Twp. Rge.					Vben ?			
rive location of tanks.	I P	11	23N	3W		lse. on	ıly.				
If this production is commingled with that	from any ot	her lease or	pool, gi		ling order numb	er: R	1-7495				
IV. COMPLETION DATA		Oil Well		4	1		γ			- y	
Designate Type of Completion	- (X)	I Out Men	'	Gas W#il	New Well	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod				Total Depth	L	.L	P.B.T.D.		1	
	1										
Elevations (DF, RKB, RT, GR, etc.) Name of Producing			ormatica	1	Top Oil/Gas I	ay		Tubing Depth			
Perforations					<u> </u>						
I CHO MOCO								Depth Casing S	hoe		
	······································	TURING	CASI	NG AND	CEMENTIN	IC PECOE	<u> </u>				
HOLE SIZE		ISING & TI			CEMENTING RECORD DEPTH SET			SACKS CEMENT			
								JINO OLIVIE			
	ļ										
				······································	 						
V. TEST DATA AND REQUES	ST FOR	ALLOW	ABLE		l						
OIL WELL (Test must be after t					be equal to or	exceed top all	owable for th	is depth or be for	full 24 hour	3.)	
Date First New Oil Run To Tank	Date of To					thod (Flow, p			·	· 	
					ļ						
Length of Test	Tubing Pr	SILE			Casing Pressu	" M I	CE	W'S'			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.	170	B (25) (5)	Ga. MCF			
						tu ta	JUN2 6	1000			
GAS WELL							ONE O	1330	·····		
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condens	MMM L	CON	THINKS Con	densale		
				Dis			3				
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressu	re (Shut-in)		Choke Size			
	<u> </u>				<u> </u>						
VI. OPERATOR CERTIFIC				NCE	l c		JSERV	ATION D	VISIO	M	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.					Date	Approve	νd	JUN 27 19	190		
(Dull # 1)					Daile	Whhiose	,u	A			
V E While Y					By_	By Bin Shan					
R. L. Wheeler, Jr. Supv. Adm. Svc.					SUPERVISOR DISTRICT #3						
Printed Name			Title		Title		SUPER	MAISOR DIS	TRICT A	<i>i</i> 3	
6-22-90	505	393-21		N-	''''		· .				
Dute		Tek	spoos j	NO.	H						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.