School: 5 Copies
Appropriate District Office
DISTRICT J
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-1M Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT E P.O. Deswer DD, Assela, NM 82210 OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brinos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

L.		TO TRA	NSP	ORT OIL	AND NA	TURAL GA	AS					
								API No.				
Amerada Hess Corporation 30-039-21231												
Drawer D, Monument, Ne	w Mexi	co 882	65									
Resecu(s) for Filing (Check proper box)	· · · · · · · · · · · · · · · · · · ·		<del></del>	<del></del>	Oth	tt (Please explo	ain)		<del></del>			
New Well	Change in Transporter of:				Effective 7-1-90.							
Recompletion	Oil Coriocher		Dry G				•					
Change in Operator   If change of operator give same	Caningho	M UM []	Conde									
and address of previous operator							··			<del></del>		
II. DESCRIPTION OF WELL	AND LE	ASE										
Lease Name	Well No. Pool Name, I				-		Kind of Lease		Lease No.			
Jicarilla Apache "B"		15	E	Basin D	<u>akota</u>		State,	State, Federal or Fee		Cont. 11		
Location Unit LetterK	:16	30	_ Feet F	rom The	South Line	146		et From The _	West	Line		
Section 30 Township	, 24	N.	Range	5	W , NI	мрм,	Rio Ar	riba		County		
THE DESIGNATION OF TRAN	CDADTT	ED OF O		III. NI A TITL	D.1. G.5							
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPURIT	or Conde			Address (Giv	e address to w	hich approved	come of this fo	em is to be se	ent)		
Giant Refining Co.					Address (Give address to which approved copy of this form is to be sent) P. O. Box 256, Farmington, N.M. 87499							
Name of Authorized Transporter of Casing			or Dry	Gas X	Address (Give address to which approved			copy of this form is to be sent)				
<del></del>	El Paso Natural Gas Co.			- <del></del>	7	P. O. Box 1492, El Pas			o, Tx. 79999			
If well produces oil or liquids, give location of tanks.	Uncit 	<b>Sec.</b> 30	<b>Т</b> ₩р. 124N	Rge.   5W	is gas actuality	y connected?	When	?				
If this production is commingled with that i	from any ot					ber						
IV. COMPLETION DATA				#								
Designate Type of Completion	- (%)	Oil Well	i	Gas W+ll	New Well	Workover	Deepen	Plug Back	Same Res'v	Yiff Res'v		
Date Spudded		npl. Ready to	o Provi	<del></del>	Total Depth	l	<u> </u>	P.B.T.D.		<u></u>		
Date Spanne		ipi. Ready u	o riou.		Total Deput	John Sopar						
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Cas	Pay		Tubing Depth				
									The same of the sa			
Perforations								Depth Casin	Shoe			
		TURING	CASI	NG AND	CEMENTI	NC PECOD	D	<u> </u>				
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE			DEPTH SET				SACKS CEMENT				
								GHORO GEMENT				
	ļ											
	<b>-</b>				ļ							
V. TEST DATA AND REQUES	T FOR	<b>ALLOW</b>	ABLE		1			<u> </u>				
OIL WELL (Test must be after t					i be equal to or	exceed top all	owable for this	depth or be t	or full 24 hou	ors.)		
Date First New Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)							
Length of Test	Tubing Pr		· · · ·	<del></del>	Casing Tream	K & 7		Chare Size				
tangui ca tea	1 doing F	CSMIC						12 Size				
Actual Prod. During Test	Oil - Bbls	B.			Water Bille			MCF				
	<u> </u>					<u> </u>	<u> 1390                                    </u>					
GAS WELL						No 7 27	A File	,				
Actual Prod. Test - MCF/D	Length of	Test			Bols. Conde	MACO		Fravity of C	ondensate	······································		
Tosting Method (pitot, back pr.)  Tubing Pressure (Shut-			f.in)		Casing Press	DIST	2.3	Choke-Size		· · · · · · · · · · · · · · · · · · ·		
roung recuros (paos, oute pr.)			<b></b> ,		Casing 11cas	me (mini-iff)		Character				
VL OPERATOR CERTIFIC	ATE O	E COMI	DI IAI	NCE	11			J				
I bereby certify that the rules and regula				IVCL	(	OIL CON	<b>ISERV</b>	ATION I	DIVISIO	NC		
Division have been complied with and	that the info	ormation giv		e e								
is true and complete to the best of my i	mowledge:	and belief.			Date	Approve	ed	JUN 27	1990			
W. W. M. C.												
Signature					By_		3	) d				
R. L. Wheeler, Jr.	Şu	ipv. Ad		vc.								
Printed Name 6-22-90	50	)5 393-	Title 2144		Title		SUMEH	VISOR DI	STRICT	13		
Date			ephone	No.								

## 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.