

OIL CONSERVATION DIVISION

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator AMERADA HESS CORPORATION		Well API No. 30-039-21235
Address DRAWER D, MONUMENT, NEW MEXICO 88265		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Other (Please explain) Recompletion <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> WELL RECOMPLETED IN CHACRA Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name JICARILLA APACHE "A"	Well No. 9	Pool Name, Including Formation OTERO CHACRA	Kind of Lease State, Federal or Fee	Lease No. CONTRACT 9
Location Unit Letter D : 890 Feet From The NORTH Line and 890 Feet From The WEST Line Section 36 Township 25N Range 5W, NMPM, RIO ARRIBA 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"/> GIANT REFINING	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 256, FARMINGTON, NM 87499	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> EL PASO NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1492, EL PASO, TEXAS 79999	
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 36
	Twp. 25N	Rge. 5W
	Is gas actually connected? YES	
	When ?	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X				X		
Date Spudded 10-15-76	Date Compl. Ready to Prod. 11-15-90	Total Depth 7500'	P.B.T.D. 3945'					
Elevations (DF, RKB, RT, GR, etc.) 6877' GR	Name of Producing Formation CHACRA	Top Oil/Gas Pay 3838'	Tubing Depth 3810'					
Perforations 3838'-3850' & 3852'-3859'		Depth Casing Shoe						
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13-3/4"	9-5/8"	374'	PREVIOUSLY RAN					
7-7/8"	5-1/2"	7,498'	PREVIOUSLY RAN					
	1.9#	3,810'						

V. TEST DATA AND REQUEST FOR ALLOWABLE

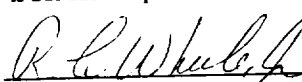
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank	Date of Test 11-16-90	Producing Method (Flow, pump, gas lift, etc.) FLOWING	RECEIVED DEC 10 1990 OIL CON. DIV. DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

GAS WELL

Actual Prod. Test - MCF/D 255	Length of Test 24 HRS.	Bbls. Condensate/MMCF --	Gravity of Condensate --
Testing Method (pilot, back pr.) FLOW. THRU SALES METER	Tubing Pressure (Shut-in) 175#	Casing Pressure (Shut-in) 330#	Choke Size 27/64"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


Signature
R.L. WHEELER, JR. SUPV. ADM. SER.
Printed Name
12-7-90 (505) 393-2144
Date
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 22 1991

By Original Signed by FRANK T. CHAVEZ

Title SUPERVISOR DISTRICT # 3

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.