- 1	HO. DI COPICA RECEIVED 15]		/
	DISTRIBUTION SANTA FE		IL CONSERVATION COM- EST FOR ALLOWABLE	AISSION Form C-104 Supersedes Old C-104 and Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO	AND TRANSPORT OIL AND	
1.	Operator Amerada Hess Co			
	Reason(s) for filing (Check proper box New Well X Recompletion Change in Ownership	Change in Transporter of:	ondensate Other (Pleas	e explain)
	If change of ownership give name and address of previous owner		-	
II.	DESCRIPTION OF WELL AND Lease Name J. Apache "F" Location	LEASE Well No. Pool Name, Include 14 Otero - Cha		State, Federal or Fee Federal 149
	Unit Letter G : 175	50 Fee: From The <u>North</u>		Feet From The <u>East</u> 2. Rio Arriba Con
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL or Condensate XX	Address (Give address	to which approved copy of this form is to be sent)
	Shell Oil Co. Inlar Name of Authorized Transporter of Car El Paso Natural Gas If well produces oil or liquids,	singhead Gas or Dry Gas 🔀	Box 1492 El	to which approved copy of this form is to be sent) Paso, Texas 79999 ted? When
•••	give location of tanks. If this production is commingled wi	G 18 25-N 5- th that from any other lease or p		er number:
17.	Designate Type of Completion	on = (X) Oil Well Gas We	i t	Deepen Plug Back Same Res'v. Diff. I
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	7-1-77	9-16-77	7200	7138 Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.) 6555 GL Perforations	Name of Producing Formation Chacra	3512'	3556 Depth Casing Shoe
	3526 ' - 3547 '			7198'
			AND CEMENTING RECO	
	HOLE SIZE	CASING & TUBING SIZE	366 ¹	
	15" 7-7/8"	9-5/8" 5-1/2"	7198	
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must able for t	in action of the last at the	
	Date First New Oil Run To Tanks	Date of Test		pu, pump, gas lift, etc.)
	Length of Test	Tubing Pressure	Cosing Pressure Water-Bbls.	Choke Size
	Actual Prod. During Test	Cii-Bole.	wcier- BDIB.	Will a more
	GAS WELL	1	Bbis. Condensate/Mid	CF Gravity of Condensate
	Actual Prod. Test-MCF/D	Length of Test	DELECTION OF THE CONTROL OF THE CONT	0
	170 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Eby	t-in) Choke Size
		2011#		2"
	back pressure		01L	CONSERVATION COMMISSION

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.

E.B.	Ziskes (Signature)
	Adm Son

(Date)

(Title)

11-15-77

APPROVED.

If this is a request for allowable for a newly drilled or dee well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for able on new and recompleted wells.

Original Signed by A. R. Kondrick

This form is to be filed in compliance with RULE 1104.

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Fill out only Sections I. II. III, and VI for changes of well name or number, or transporter, or other such change of con Separate Forms C-104 must be filed for each pool in m