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UNCLAS.	
LINKS OFFICE	
TRANSPORTER	Oil 1
	Gas 1
STATION	1
STATION OFFICE	

NEW METHOD OF COMPLIANCE COMMISSION
REQUEST FOR ALLOWABLE

Form O-11
Supervisor's Office
Effective 1-1-72

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company Hess Oil & Gas Company	
Address P. O. Drawer 570, Farmington, New Mexico	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of Oil ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

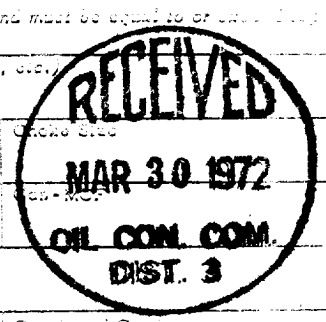
Location Rattlesnake Canyon	Well No. 1	Kind of Lease Undesignated Production	State, Federal or Fee State
Unit Letter N	220	Feet From The South	Line and 1680
Line of Section 32	Township 32N	Range 8W	San Juan County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil ☐ or Condensate ☐	Plateno	P. O. Box 108, Farmington, New Mexico	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐		Address (Give address to which approved copy of this form is to be sent)	
E & P N G			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Top

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

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Prod.	Other Prod.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (OS, RAS, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					
PIPE SIZE	CHUCKER	DEPTH OUT	SPACING OUT					

VI. LEAK TEST AND REQUEST FOR ALLOWABLE (This form is to be filled in compliance with RULE 11.1. It must be filled out for every well in accordance with RULE 11.1. It must be filled out for every well in accordance with RULE 11.1. It must be filled out for every well in accordance with RULE 11.1.)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (flow, pump, gas lift, etc.)	Check Size
Length of Test	Testing Procedure	Casing Pressure	Check Size
Actual Prod. During Test	Oil-Base	Water-Base	Check Size
Actual Prod. Test-MOF/D	Length of Test	Check Condensate/MOF	Gravity of Condensate
Testing Method (flow, back, etc.)	Testing Procedure (checkmark)	Casing Pressure (checkmark)	Check Size



VII. 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.

Signature District Superintendent	Original Signed by Emery C. Arnold
Date March 29, 1972	Supervisor DIST. #3