

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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TRANSPORTER	OIL	
	GAS	
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Amerada Hess Corporation		
Address Drawer D, Monument, New Mexico 88265		
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> New Well	<input type="checkbox"/> Oil	Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)
<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal B	Well No. 1	Pool Name, including Formation Bronco Wolfcamp	Kind of Lease State, Federal or Fee Federal	Lease No. LC064605
Location Unit Letter <u>G</u> : <u>1538</u> Feet From The <u>East</u> Line and <u>1983</u> Feet From The <u>North</u> Line of Section <u>11</u> Township <u>13S</u> Range <u>38E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Phillips Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook St., Odessa, Texas 79762	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> None - Prod. gas used in lease operations.	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 11
	Twp. 13S	Rge. 38E
	Is gas actually connected? When	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

R. L. Whelan, Jr.
(Signature)
Supv. Adm. Svc.
(Title)
6-15-87
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 18 1987, 19____
BY Orig. Signed by
Paul Kautz
TITLE Geologist

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

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiple completed wells.

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		X		
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
	5-21-87		11,875'			11,000'			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
3810' DF	Wolfcamp		9,496'			9,392'			
Perforations						Depth Casing Shoe			
7" csg. perf. fr. 9496' to 9516' & 9484' to 9488'.									
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
17-1/2"	13-3/8"		319'			450 sks.			
12-1/4"	9-5/8"		4,543			1200 sks.			
8-3/4"	7"		11,800'			700 sks.			

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
5-21-87	6-8-87	Kobe hydraulic free type pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	2300#	----	2"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	33	0	1.0

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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JUN 16 1987

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