

NEW MEXICO OIL CONSERVATION COMMISSION  
**REQUEST FOR ALLOWABLE  
 AND  
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104  
 Supersedes Old C-104 and C-105  
 Effective 1-1-65

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

**I. OPERATOR**  
 Operator  
Amerada Hess Corporation  
 Address  
Box 591 - Midland, Texas 79701

Reason(s) for filing (check proper box)  
 New Well  Change in Transporter of:  
 Recompletion  Oil  Dry Gas   
 Change in Ownership  Casinthead Gas  Condensate

Other (Please explain) **CHANGE NAME FROM AMERADA DIV. AMERADA HESS CORPORATION TO: AMERADA HESS CORPORATION EFFECTIVE AUG. 1, 1971**

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name State "L"	Well No. 1	Pool Name, including Formation Monument Grayburg SA	Kind of Lease State, Federal or Fee	State	Lease No. B1559
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Location  
 Unit Letter E ; 1980 Feet From The N Line and 4620 Feet From The E  
 Line of Section 20 Township 19S Range 37E, NMPM, Lea 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"/> Shell Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) Box 2648 - Houston, Texas
Name of Authorized Transporter of Casinthead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1589 - Tulsa, Okla.

If well produces oil or liquids, give location of tanks.	Unit G	Sec. 20	Twp. 19S	Rge. 37E	Is gas actually connected? Yes	When Unknown
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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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casinq Shoe			

**TUBING, CASING, AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

**V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL** (Test must be after recovery of total volume of flood oil and must be equal to or exceed top oil 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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

**GAS WELL**

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

**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.

J. H. D. [Signature]  
**PRODUCTION RECORDS SUPERVISOR**  
 (Title)

OIL CONSERVATION COMMISSION  
**AUG 18 1971**, 19\_\_

APPROVED \_\_\_\_\_  
 BY John W. Runyan  
 Geologist  
 TITLE \_\_\_\_\_

This form is to be filled in compliance with RULE 1104.  
 If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the data tests taken on the well in accordance with RULE 111.  
 All sections of this form must be filled out completely for this form to be considered valid.

RECEIVED

AUG 11 1971

OIL CONSERVATION COMM.  
HOBBS, N. M.