Second J Caprol Appropriate Descrip Office ON TAXIJ F.O. Box 1900, Hobbs, NA 90340 Energy, Minerals and Natural Resources Department

Form C-101 Bertand 1-1-00 See Instructions at Bottom of Page

PATENCE SO, Anda, 104 8010

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

DISTRICT ST 1000 Ruo Brains Rd., Assec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator								Wall	NI Na			
Amerada Hess Corpora	tion											
Drawer D, Monument,	New Me	xico 8	8265									
Resson(s) for Filing (Check proper box)						Out	et (Piease explo	iie)				
New Web	Change in Transporter of: Amerada Hess Corpo								ration p	hysical	ly took	
Recompletion	ON Dry Cas over operation on 11-7-89.											
					<u>ப</u>							
If change of operator give name John	H. Hen	drix C	orpor	atio	on,	223 West	Wall, Su	ite 525	, Midlan	l, Texa	s 79701	
IL DESCRIPTION OF WELL	AND LE	ASE										
Lones Name	Well No. Pool Name, Includi					ag Formation		Kind	of Lease		1	
State T Btry. 2		7 Eunice Mon					SA		State, Federal or Fee		B-1431	
Location	10	.00										
Unit Lotter	- :	80	. Feet Fr	T and	×	South Lin	660 • and) _. Fr	net From The _	West	Line	
Section 28 Township	19)S	Range		37	E		Lea			UR	
29CDOD 20 10WHHI		<u></u>	MARK			N	ИРМ ,				County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS SCURLOCK PERMIAN CORP EFF 9-1-91												
Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent)											
Permian Corporation							P. O. Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casing							Address (Give address to which approved copy of this form is to be sent)					
Northern Natural Gas						2223 Do	dge Stree	t, Omah	a, Nebras	ka 681	02	
If well produces oil or liquids, give location of tanks.	a, Unit Sec. Twp. Rge.					is gas actually	y comeand?	When	7			
We 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 W	'eli	New Well	Workover	Doepes	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		npl. Ready to	Prod.			Total Depth	L	<u> </u>				
									P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	(DF, RKB, RT, GR, etc.) Name of Producing Formation						Pay		Tubing Depth			
Perforations						ł		-	Depth Casing Shoe			
									A par Castag	SINE		
TUBING, CASING AND						CEMENTI	NG RECOR	D				
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET			SACKS CEMENT			
									·			
	 											
	 											
V. TEST DATA AND REQUES	T FOR	ALLOW	ABLE									
OIL WELL (Test must be after n	ecovery of I	total volume	of load	oil and	i musi	be amal to ne	exceed too allo	umble for thi	adamet as to de	- 4.21.94.4.	•	
Date First New Oil Run To Tank	Date of To	est.				Producing Me	thod (Flow, pu	mp. eas lift.	s aepin or be jo se.)	T JULI 24 ROL	<i>PS.)</i>	
							, .,	7, 4	,			
Length of Test	Tubing Pressure					Casing Pressu	T		Choke Size	Choke Size		
	Ol Du					200			<u> </u>			
Actual Prod. During Test	Oil - Bbls.					Water - Bbis.			Gas- MCF			
	<u> </u>											
GAS WELL Actual Prod. Test - MCF/D	II anath of	Total										
Actual Prod. 188 - MCP/D	Leagth of Test					Bbis. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size			
						(3.12.12)			Choice Size	GRE SEE		
VI. OPERATOR CERTIFIC	ATE O	F COMP	MALE	JCE					<u> </u>			
1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above						OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.						Date	Approved	j	NOV * 9 1989			
K Mhula J												
Signature Signature Supprise Adm Siza							ByOrig. Signed by					
R. L. Wheeler, Jr. Supv. Adm. Svc. Printed Name Tatle						Paul Kautz Geologist						
11-8-89 505 393-2144						Title.			CLEOTORINE.			
Dute		Tele	phone N	lo.								
	سيون الم											

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) Senarate Form C-104 must be filed for each mool in multiply completed wells.