State of New Mexico Ener Minerals and Natural Resources Department

## **OIL CONSERVATION DIVISION**

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

TO TRANSPORT OIL AND NATURAL GAS

STRICT III 00 Rio Brixos RA., Assec, NM 87410

STRICT R 3. Drawer DD, Astoda, NM 84210

propriete Déstrict Office THECT ! ). Box 1980, Hobbe, NSM \$2240

REQUEST FOR ALLOWABLE AND AUTHORIZATION

enlar							Well X	PI No.			
AMERADA HESS CORPORA	TION					·	1	300	<u> 250580</u>	7	
Arees DOAWED D. MONIMENT 1	NEW MEVI	ורח פי	2265								
DRAWER D. MONUMENT.  Secon(s) for Filing (Check proper box)	NEW PIEA	I CU O	3203		X Othe	s (Please expla	in)				
w Well		Change in			_			_			
completion 🔲	Oil	_	Dry Cas		E	EFFECTIVE 11-01-93.					
ange in Operator	Casinghos	4 Gas	Condens	mto []							
address of previous operator		<del></del>				····					
DESCRIPTION OF WELL	AND LEA	ASE									
ase Name BLK	. 17 Well No. Po		1		-			Kind of Lease Lease No. State, Federal or Fee			
NORTH MONUMENT G/SA	UNIT	NIT 2 EUNICE MON			NUMENT G	/SA	State,	Federal or Fee	1		
Unh Loner B	. 99	90	, Feet Fro	on The N	ORTH Lim	and16	50 re	et From The	EAST	Tine	
Section 33 Townsh	ip 19	98	Range	37	E , N	мрм,	1	_EA		County	
DESIGNATION OF TRAP	1SPQ10H	P-QE-Q	IL ANI	D NATU	RAL GAS		···	. —— ————————			
THE OF Authorized Transporter of Oil	W XX	TIECTIVE		ne LP	Address (Give attress to which approved copy of this form is to be sens)						
EOTI OIL PIPELINE COMPANY THE CHIVE 4-1-940 P THE OF Authorized Transporter of Casinghead Gas X Joy Dry Cas SID RICHARDSON CARBON & GASOLINE CO.					P.O. BOX 4666, HOUSTON, TEXAS 77210-46666  Address (Give address to which approved copy of this form is to be sent)						
					1			201 MAIN,			
e all produces oil or liquids, a location of tanks.	Unit J	50c. 33	Twp	137E		~ ~~~~~~~	When				
nie production is coordingled with that  COMPLETION DATA	from any oth	er lease or	pool, giv	e comming	ling order numi	ber:					
Designate Type of Completion	- O(1)	Oil Well	ija	de Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	hill Resiv	
u Spudded		pl. Ready is	o Prod.		Total Depth	1	]	P.B.T.D.		J	
associate DE DEP DE CD atc)					To Relight	R-:-					
vations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gai Pay			Tubing Depth			
formions	_J	<del></del>			<u> </u>			Depth Casing	Shoe		
								1			
TUBING, CASING AND						NG RECOR	D				
HOLE SIZE				SIZE		DEPTH SET		SACKS CEMENT			
	- <del> </del>										
4636 KT&T TOW EES:=					<u> </u>	-	· <del></del>	-			
TEST DATA AND REQUE L WELL (Test must be after											
te First New Oil Rus To Tank	be equal to or exceed top allowable for this depth or be for full 24 hours.)  Producing Method (Flow, piersp., gas lift, etc.)										
		Date of Test				sanza (r.iow, pi	ery, gar iyi,	eic. <i>j</i>			
ogth of Test	Tubing Pre	Tubing Preserve				nte		Choke Size			
tual Fred. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbla			Gai- MCF			
						•		See- MC			
as well								. 1			
mal Frod Test - MCF/D	Length of	Length of Test				mue/MMCF		Gravity of Constraint			
ting Method (pilot, back pr.)	d faire but a l										
and treation (bear, back by)	I woing Pro	Tubing Pressure (Shut-m)				Cosing Pressure (Shut-in)			Choke Size		
OPERATOR CERTIFIC	ATE OF	COM	OF FARI	lcr	\			<u> </u>		· · · · · · · · · · · · · · · · · · ·	
I beroby certify that the rules and regu	lations of the	Ol Conses	-		(	OIL COM	JSFRV	ATION D	11/1016	M.	
DIVISION DAYS been complied with and	that the info	rmetina aiv	en above		1			18 1993	JIOIV IV	Л¶	
is true and complete to the best of my	Knowledge a	nd belief.			Date	Approve		T 0 1333			
July 2	K					- Whine	·	·			
Signature TEDDY LIADVE	-4-	Wirel	/		By_	ORIGIN	AL SIGNE	BY JERRY	EXTON		
TERRY HARVE	<u> </u>	AFF AS		ANT			DISTRICT I	SUPERVISOR	CALUN		
11-03-93	(5	05) 39	Title 3-214	14	Title						
Delle			ephone N								
INSTRUCTIONS: This for				20.00	1	reductive and another second	4	da de de de la secono en			

5: 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) Separate Form C-104 must be filed for each pool in multiply completed wells.