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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Unergy, Minerals and Natural Resources Depar

P.O. Drawer DD, Astonia, NM \$2210

I.

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

DISTRICT III 1000 Rio Brisos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL CAS

						I WALL	DI U		
Amerada Hess Corporati	ion					Well A		06020	
6/dress							30-025	-00039	
Drawer D, Monument, Ne	ew Mexic	o 882	265						
Reason(s) for Filing (Check proper box)					X Other (Please expla	zin)			
iew Well		Change is			•				
Recompletion	Off		Dry G		Ε	FFECTIVE	11-01-	93	
hange in Operator	Casingheed	Ges _	Coada	estate 📗				30	
change of operator give name d address of previous operator								··	
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L DESCRIPTION OF WELL									
DIK. Z				iame, includir	=		Lesse		ase No.
North Monument G/SA Un	nit	6	E	<u>unice Mo</u>	nument G/SA	Sinte,	Federal or Fed	_	
Location		_							
Unit Letter F	<u> : 198</u>	0	Feat P	rom The No	orth Line and 1	980 Fe	et From The	West	Lin
	000								
Section 9 Township	<u>20S</u>		Range	37E	, NMPM,	L	ea		County
II DESIGNATION OF TO AN	CDADTE			TO NIA COST 15					
II. DESIGNATION OF TRAN  Varue of Authorized Transporter of Oil		or Condea	IL AI	U NATUI	KAL GAS		<del></del>	· · · · · · · · · · · · · · · · · · ·	
EQTT Qil Pipeline Co.					Address (Give address to w				
Name of Authorized Transporter of Casing	ghead Gas		or Dry	Get [	P.O. Box 4666,	Houston	, lexas	//210-	4666
Warren Petroleum Compa		ليك	U. D.,	<b></b>	Address (Give address to w	Tuloo	COPY OF UNUSTO	orm is to be se	M)
f well produces oil or liquids.		Sec.	Twp	Rge.	P.O. Box 1589, is gas actually connected?	UISA     When		14	
ive location of tanks.	i e i	9	209		gaj vombandi	j woen	•		
this production is commingled with that	from any other				ag order number:	l	<del></del>		
V. COMPLETION DATA	-	•							
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Designate Type of Completion	- (X)	İ	i		1	1 roches	riug back	PATIE KETA	Diff Res'v
Pale Spudded	Date Comp	i. Ready to	Prod.	· · · · · · · · · · · · · · · · · · ·	Total Depth	.l	P.B.T.D.	<u> </u>	J
levations (DF, RKB, RT, GR, etc.)	Name of Pr	Producing Formation			Top Oil/Gas Pay		Tubing Depth		
		·							
erforations							Depth Casin	e Shoe	
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<del></del>							i		
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HOLE SIZE					CEMENTING RECOR		<u> </u>	SACKS CEMI	ENT
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s 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

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.