

DISTRICT II  
P.O. Drawer DD, Azusa, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Amerada Hess Corporation		Well API No. 30-025-09891
Address Drawer D, Monument, New Mexico 88265		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> <input checked="" type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
EFFECTIVE 11-01-93 WELL TAIL		
If change of operator give name and address of previous operator		

### II. DESCRIPTION OF WELL AND LEASE

Lease Name Blk. 22 North Monument G/SA Unit	Well No. 2	Pool Name, Including Formation Eunice Monument G/SA	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter B : 330 Feet From The North Line and 2310 Feet From The East Line Section 4 Township 20S Range 37E, NMPM, Lea County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil EOTT Oil Pipeline Co. <input checked="" type="checkbox"/> Effective 4-1-94	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4666, Houston, Texas 77210-4666			
Name of Authorized Transporter of Casinghead Gas Warren Petroleum Company <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, OK 74102			
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 4	Twp. 20S	Rge. 37E
Is gas actually connected?		When?		

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'v
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 Casing 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 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 Tank	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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

Signature R.L. Wheeler Jr.  
Printed Name R.L. Wheeler Jr. Supv. Admin. Svc.  
Date 11-22-93 Title 505-393-2144  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved DEC 01 1993

By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

Title \_\_\_\_\_

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