

NAME OF OPERATOR	
LAND OFFICE	
TRANSPORTER	☐ OIL ☐ GAS
OPERATION	
PRODUCTION OFFICE	

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

Form C-101
Supersedes Old C-101 and C-102
Effective 1-1-55

Operator Amerada Hess Corporation	
Address P. O. Box 591, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	CHANGE NAME FROM AMERADA DIV. AMERADA HESS CORPORATION TO: AMERADA HESS CORPORATION EFFECTIVE AUG. 1, 1971
Recompletion ☐	
Change in Ownership ☐	
Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ida White	Well No. 1	Pool Name, Including Formation Emmont Yates 7 Rivers Queen	Kind of Lease State, Federal or Fee Patent	Lease No.
Location Unit Letter K, 1980' Feet From The South Line and 1980' Feet From The West				
Line of Section 35 Township 20-S Range 36-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas-New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) Box 1510-Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 4th & Washington-Odessa, Texas 79760					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 35	Twp. 20-S	Rge. 36-E	Is gas actually connected? Yes	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'tv.	Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DI, 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 liquid oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

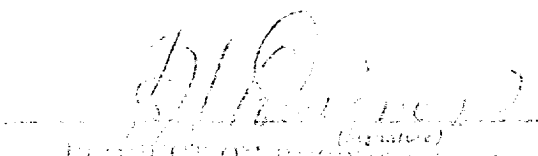
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (inlet-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. R. [unclear]
DIRECTOR, OIL CONSERVATION COMMISSION
(Title)

OIL CONSERVATION COMMISSION

APPROVED AUG 18 1971
BY John W. Runyan
Geologist
TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 1104.

All sections of this form must be filled out completely for allowable to be considered for computation.

RECEIVED

AUG 12 1971

OIL CONSERVATION COMM.
HOBBS, N. M.