	NC. OF COPIES RECEIVED			
ļ	DISTRIBUTION I		CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-116
Ì	FILE	REQUEST	FOR ALLOWABLE AND	Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRA		S
	LAND OFFICE			
	TRANSPORTER GAS	NAME CHANGE		e Corp.
	OPERATOR 1	AMERADA HESS CORPO	PRATION	troleum Corp.
1.	PRORATION OFFICE	то	No mada	da Hess
	AMERADA DIVISION, AMERADA HESS CORPORATION AMERADA DIVISION, AMERADA HESS CORPORATION AMERADA DIVISION, AMERADA HESS CORPORATION			
	AMERADA DIVISION, AMERADA HESS CORPORATION  AMERADA DIVISION, AMERADA HESS CORPORATION  AMERADA Petroleum Corporation  P. O. Box 1459. Durango, Colorado			
ŀ	P. O. Box 1/459, Durango, Colorado  Reason(s) for filing (Check proper box)  Other (Please explain)			
j	Reason(s) for filing (Check proper box	9, Durango, Colorado	Other (Please explain)	
	Hew Well	Change in Transporter of:	change to go in ef	fect 2/1/66.
	Hecompletion Change in Ownership	Oil Dry Ga Casinghead Gas Conder		2, 2, 3, 2, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,
ļ	one in Ownership	Conde	issue [4]	·
	If change of ownership give name and address of previous owner			
и.	DESCRIPTION OF WELL AND		me, Including Formation	Kind of Lease
				State, Federal or Fee
	Jicarilla Apache "A"	58.51	1 Dakota	recerat
	Unit Letter <u>r</u> ; <u>165</u>	Feet From The North Lin	ne and Feet From Th	e <b>West</b>
	_		• •	Causalii
Ì	Line of Section 26 , To	ownship 25N Range	5W , NMPM, Rio Arri	<b>ba</b> County
	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Futhorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)  Rock Island Oil & Refining Co. The State of Futhorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)			
	Marke of Authorized Transporter of Casinghead Gas or Dry Gas Address (Othe dualess to which approved copy of this form is to be sent)			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	
	give locat on of tanks.	N 23 25N 5W		
	f this production is commingled with that from any other lease or pool, give commingling order number:			
IV.	COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.
	Designate Type of Completi	$\operatorname{con} - (X)$		<u> </u>
	Date Spud led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	[reo]	Name AMERIANIC FROM	Top Oil/Gas Pay	Tubing Depth
	1.601	Name AMERADA HESS CORPORATION AMERADA HESS CORPORATION AND EFFECTIVE ALLO	PN .	
	Perforations	EFFECTIVE AUG. 1, 1971	TON	Depth Casing Shoe
			D CEMENTING RECORD  DEPTH SET	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEFINACI	SACKS CLINEAT
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to at exceed top all able 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.)
				/ KLULIYED /
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	And of Fred During Took	Oil-Bbls.	Water-Bbls.	FEB3 1956
	Actual Prod. During Test	J.1 D		OIL CON. COM.
				DIST. 3
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
	resumg weemed (paos, back pis)	Taking I toobuto		
VI.	CERTIFICATE OF COMPLIAN	NCE	OIL CONSERVAT	TON COMMISSION
	THE COME DATE	• •		
	I hereby certify that the rules and	regulations of the Oil Conservation	AFFRUVEII	I Descrit C Armold
	above is true and complete to the	with and that the information given ne best of my knowledge and belief.	BYOriginal Signed	d Emery C. Arnold
	· · · · · · · · · · · · · · · · · · ·		Supervisor Dist. #	3

Foreman

January 31, 1966

(Title)

(Date)

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 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

