

OIL CONSERVATION DIVISION

P. O. BOX 2000
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
STATE	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	
Operator	

Amerada Hess Corporation

Address

Box D, Monument, New Mexico 88265

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Dry Gas ☐Casinghead Gas ☐Condensate ☐

Other (Please explain)

Casinghead GAS MUST NOT BE
PLACED AFTER 3/20/86
UNLESS AN EXCEPTION TO B-4070
IS OBTAINED.Change of ownership give name
and address of previous ownerTHIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Homestake Royalty 10	1	Northeast Lovington Perm.	State, Federal or Fee Fee	

Location

Unit Letter J : 1700 Feet From The South Line and 2300 Feet From The East

Line of Section 10 Township 16S Range 37E, NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Koch Oil Company	Box 1558, Breckenridge, Texas 76024
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)

If well produces oil or liquids,
give location of tanks.

Unit J Sec. 10 Twp. 16S Rge. 37E

Is gas actually connected? No When

If this production is commingled with that from any other lease or pool, give commingling order number:

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.					
11-12-85	1-27-86	12,075'	11,986'					
Elevations (DF, RAB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3811' DF, 3812' KB	Strawn	11,590'	11,505'					
Perforations			Depth Casing Shoe					
11,598' to 11,650'			12,075'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	510'	575 sks.
11"	8-5/8"	5045'	2800 sks.
7-7/8"	5-1/2"	12,075'	500 sks.

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

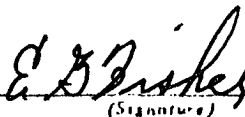
(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
1-20-86	1-29-86	Flow
Length of Test	Tubing Pressure	Casing Pressure
24 hrs.	150# to 400#	-
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.
	207	330
		300

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Surv. Adm. Ser.

1-29-86

(Date)

OIL CONSERVATION DIVISION

APPROVED

JAN 30 1986

Eddie W. Seay

BY

Oil & Gas Inspector

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 111.All sections of this form must be filled out completely for allow-
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of owner,
well name or number, or transporter, or other such change of condition.Separate Form C-104 must be filed for each pool in multiple
completed wells.