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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. OPERATOR

Operator
Anderson Oil & Gas Company, Inc.

Address
250 Mid America Building, Midland, Texas 79701

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:

Recompletion Oil Dry Gas

Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name **Hess State** Well No. **I** Pool Name, including Formation **Southeast Bagley-Wolfcamp Gas** Kind of Lease **State** Lease No. **E-1313**

Location
Unit Letter **L** **2080** Feet From The **South** Line and **690** Feet From The **West**

Line of Section **34** Township **11-S** Range **33-E**, NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate
Amoco Pipeline Address (Give address to which approved copy of this form is to be sent)
3411 Knoxville Avenue, Lubbock, Texas

Name of Authorized Transporter of Casinghead Gas or Dry Gas
Warden Petroleum Corporation Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1589, Tulsa, Oklahoma 74102

If well produces oil or liquids, give location of tanks. Unit **L** Sec. **34** Twp. **11-S** Rge. **33-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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v.	Diff. Res'v. <input checked="" type="checkbox"/>
Date Intated Workover 10-24-74	Date Compl. Ready to Prod. 12-20-74	Total Depth 10,100'	P.E.T.D. 9143'					
Elevations (DF, RKB, RT, GR, etc.) 4271 KB	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 8,623'	Taking Depth 8568'					
Perforations 8627' to 8632'	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	12 3/4"	400'	400 sx
11 "	8 5/8"	3760'	300 sx
7 7/8"	5 1/2"	10100'	375 sx

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)

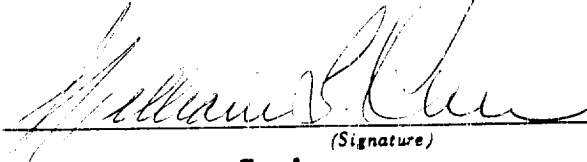
Date First New Oil Run To Tanks 12-9-74	Date of Test 12-22-74	Producing Method (Flow, pump, gas lift, etc.) Flowing
Length of Test 24 Hours	Tubing Pressure 50 psig	Casing Pressure Packer
Actual Prod. During Test 78 Bbl Fluid	Oil - Bbls. 41	Water - Bbls. 37
		Gas - MCF 52

GAS WELL

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

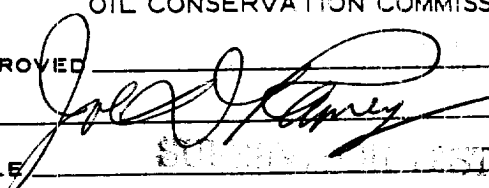
VI. CERTIFICATE OF COMPLIANCE

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.


(Signature)
Engineer
(Title)
December 26, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____ 1974

BY 

TITLE **DISTRICT**

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 only Sections I, II, III, and VI 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.