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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

NAME CHANGE
AMERADA PETROLEUM CORP.
TO AMERADA HESS CORP.
EFFECTIVE July 1, 1969

Operator Amerada Petroleum Corporation	
Address P. O. Drawer 817 - Seminole, Texas 79360	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE UNDESIGNATED				
Lease Name Lincoln	Well No. 1	Pool Name, Including Formation Bronco Wolfcamp	Kind of Lease State, Federal or Fee State	Lease No.
Location Bronco-Wolfcamp R-3562				
Unit Letter D	640	Feet From The North Line and 640	Feet From The West	
Line of Section 14	Township 13-S	Range R-30E	NMPM, Lon	County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Phillips Pipe Line Co.			Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 817, Seminole, Texas 79360	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None			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 D	Sec. 14	Twp. 13-S	Rge. 30E
			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.
X		X			X		X		X
Date Spudded 7-19-68	Date Compl. Ready to Prod. 8-18-68	Total Depth 11,990'		P.B.T.D. 9392					
Elevations (DF, RKB, RT, GR, etc.) 3016' D.F.	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 9494'		Tubing Depth 9391'					
Perforations 9494' to 9370'				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
17-1/8"	13-3/8"	319'		350					
13-1/4" & 11"	8-5/8"	4577'		1300					
7-7/8"	5-1/8"	11,230'		650					

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 Allowable N.A.	Date of Test 8-18-68	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 1200	Casing Pressure 1200	Choke Size 1/2"
Actual Prod. During Test 201	Oil - Bbls. 201	Water - Bbls. 2	Gas - MCF 221.6

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		OIL CONSERVATION COMMISSION AUG 26 1968	
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.		APPROVED _____, 19____	
_____ (Signature)		BY _____	
Assistant District Superintendent (Title)		TITLE _____	
August 22, 1968 (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 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.	

THE UNIVERSITY OF CHICAGO
DIVISION OF THE PHYSICAL SCIENCES
DEPARTMENT OF PHYSICS

PHYSICS 354
LECTURE 10
THERMAL CONDUCTIVITY

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