

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I.

Operator Amerada Hess Corporation	
Address Drawer D, Monument, New Mexico 88265	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
Effective May 17, 1988	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

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

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Texas New Mexico Pipeline	Box 2528, Hobbs, New Mexico 88240	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Warren Petroleum Company	Box 1589, Tulsa, Oklahoma 74101	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 9
	Twp. 16S	Rge. 37E
	Is gas actually connected?	When
	Yes	3-3-86

If this production is commingled with that from any other lease or pool, give commingling order number CTB-318

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Supr. Adm. Svc.

(Title)

5-17-88

(Date)

OIL CONSERVATION DIVISION

MAY 19 1988

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY \_\_\_\_\_  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR

TITLE \_\_\_\_\_

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

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

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

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

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

mfp