NO US COTIS ASCIEVED			
DISTRIBUTION	NEW MEXICO OI	L CONSERVATION COMMISSIO	
SANTAFC	REQUE	ST FOR ALLOWABLE	Porm C=104 Supersedes Old C=104 and C=,
FILE U.S.G.S.		AND	Effective 1-1-65
LAND OFFICE	AUTHORIZATION TO T	RANSPORT OIL AND NATE	JRAL GAS
TRANSPORTER OIL			
GAS GAS			
OPERATOR			
PRODATION OFFICE			
Address Address	s Corporation		
P. O. Box 59	1, Midland, Texas 797	01	
Reason(s) for filing (Check proper	box)	Other (Please expla	in) CHANGE NAME FROM
New Well	Change in Transporter of:		AMERADA DIV. AMERADA HESS CORPORATION
Recompletion Change in Cy. ership		Gas	TO: AMERADA HESS CORPORATION
Change in Ow ership	Casinghead Gas Con	densate	EFFECTIVE AUG. 1, 1971
If change o, ownership give nam and address of previous owner	ę.		
I. DESCRIPTION OF WELL AN			
Lease Name	Well No. Pool Name, Including	Formation Kind	of Lease
State "C"	1 1		Federal or Fee State A1469
Location			
Unit Letter <u>A</u> ; <u>3</u>	30 [†] Feet From The <u>North</u> L	line and <u>330</u> * Fee	From The East
Line of Section 36	Township 18-5 Range 37	7 <u>- Е</u> , м мрм,	Lea County
I. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL O	A C	DEG County
Name of Authorized Transporter of	Oil 🔯 or Condensate 🗍		h approved copy of this form is to be sent)
Shell Pipeline Comp	any	Box 2648 - Houst	Com Toxac 77001
Name of Authorized Transporter of		Address (Give address to which	ton, Texas 77001 h approved copy of this form is to be sent)
Phillips Petroleum	the second	<u>4th & Washingtor</u>	1. Odessa, Texas 79760
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	is gas actually connected?	When
	A 36 18-8 37-		
. <u>COMPLETION DATA</u>	with that from a ny other lease or pool	, give commingling order number	2f:
Designate Type of Comple	Oil Well Gus Well	New Well Workover Deel	pen Plug Back Same Resty, Diff. Resty,
Date Spudded			
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, CR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	
		Top On/Ods Pdy	Tubing Depth
Perforations	• .		Depth Casing Shoe
HOLE SIZE		D CEMENTING RECORD	
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
 TEST DATA AND REQUEST 1 OIL WELL 	FOR ALLOWABLE (Test must be a	fter recovery of sotal volume of lo	ad oil and must be equal to or exceed top allows
Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours) Producing Method (Flow, pump,	
		i i i i i i i i i i i i i i i i i i i	gus sijt, etc./
Length of Test	Tubing Pressure	Casing Pressure.	Choke Size
Actual Prod. During Test	Oil-Bbie.	Water - Bbla.	Gda-MCF
GAS WELL			
Actual Frod. Test-MCF/D	Length of Test	Bbis. Condensets/MMCF	Gravity of Condensate
Testing Method (pitor, back pr.)	Tubing Pressure (Shet-in)	Casing Pressure (Ehut-12)	Choke Size
CERTIFICATE OF COMPLIAN	CE		
			RVATION COMMISSION
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	JG 1 8 1971
Commission have been comolled.	with and that the information given c best of my knowledge and belief,		n. Runiem
\sim	and benefit,		Geologist
Anth		TITLE	
(1-11 Y).	()	This form is to be filed	d in compliance with RULE 1104.
- Japping and	(1 Cardenter)	If this is a request for	allowable for a newly drilled or despend
PRODUCTION 1	AECORDS SUPERVISOR	well, this form must be seen to the well in .	empended by a tabulation of the deviation - accordance with RULK 111.
a na an an ann an an an an an an an an a	τις μ		a must be filled out completely for eliev-

	1		All	٤,	act.	008	of	this	1 1725	muet	bə	filled	out	completely	for	ellevr
	ver b	e • ·	-		. •	- * -	u vierk	der e f	1 - · · · ·	•						

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AUG 111971 OIL CONSERVATION COMM. HOBBS, N. M.