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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	
Operator	

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-105
Effective 1-1-65

Address	
AMERADA HESS CORPORATION	
P. O. BOX 591 - MIDLAND, TEXAS	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐	Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐	Other (Please explain) CHANGE NAME FROM AMERADA DIV. AMERADA HESS CORPORATION TO AMERADA HESS CORPORATION EFFECTIVE AUG. 1, 1971
If change of ownership give name and address of previous owner	

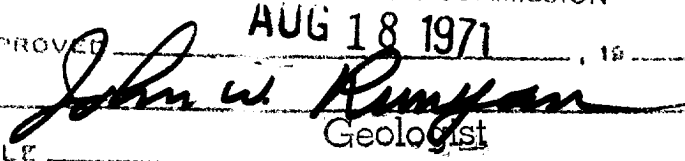
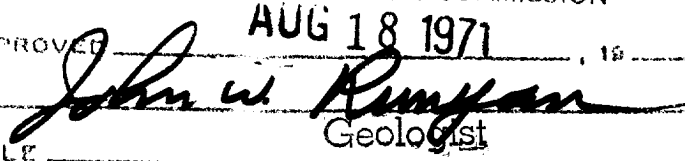
DESCRIPTION OF WELL AND LEASE				
Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
W. A. Weir Gas Comm.	7	Eumont Queen Gas	State, Federal or Fee	Fee
Location				
Unit Letter	0	1980 Feet From The	E	Line and 660 Feet From The S
Line of Section	26	Township	19S	Range 36E
NADP, Lea 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)		
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒		Address (Give address to which approved copy of this form is to be sent)		
Northern Nat. Gas		2223 Dodge St., Omaha, Neb. 68101		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.
Is gas actually connected?		When		
Yes				

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't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.E.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Perforations					Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL			
(Test must be after recovery of total volume of fluid 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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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 AUG 18 1971	
BY 		BY 	
PRODUCTION RECORDS SUPERVISOR		Geologist	
(Title)		TITLE	
		This form is to be filled 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 density logs taken on the well in accordance with RULE 111.	
		All sections of this form must be filled out completely for all wells.	

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AUG 12 1971

OIL CONSERVATION COM.
HOUSTON, TEXAS