



NEW MEXICO ENERGY, MINERALS
& NATURAL RESOURCES DEPARTMENT

OFFICE OF THE SECRETARY
2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-8980

Jennifer A. Salisbury
CABINET SECRETARY

October 20, 1997

Amerada Hess Corp.
ATT; Mike Jumper
P. O. Box 840
Seminole, TX 79360-0840

RE: Reclassification of Well
M. E. Gaither, 1-I
Sec. 34-T19S-R36E
Eumont Yates SR-QU Pool

Gentlemen:

According to the recently submitted Gas-Oil-Test dated 2-13-97, the above-referenced well will be reclassified from a prorated gas well to an oil well in the Eumont Yates Seven Rivers Queen Pool effective January 1, 1998, and the gas allowable cancelled effective that date.

If for some reason you feel this test does not reflect the proper classification of this well, please submit another test for our consideration by November 3, 1997.

If the well is to be reclassified to an oil well in the Eumont Yates Seven Rivers Queen Pool, please submit the following:

- 1.) Revised Form C-102, acreage dedication plat, outlining 40 acres for this oil well completion.
- 2.) Form C-104 showing reclassification from gas to oil effective January 1, 1998, and designating change of transporters to oil and casinghead gas.

If you have questions concerning the above, please contact Nelda Morgan at (505) 393-6161.

Very truly yours,

OIL CONSERVATION DIVISION

Chris Williams
Chris Williams
Supervisor, District I

CW:nm

7-16-98
Remains Gas
B

Submit 2 copies to Appropriate
District Office.
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
811 S. 1st Street, Artesia, NM 88210-2834
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Form C-116
Revised 1/1/89

GAS - OIL RATIO TEST

Operator Amerada Hess Corporation	Pool EUMONT YATES SEVEN RIVERS QUEEN (GAS)	County LEA														
Address P.O. Box 840, Seminole, TX 79360																
LEASE NAME	WELL NO.	LOCATION U S T R	DATE OF TEST	CHOKE SIZE	TBG. PRESS.	DAILY ALLOW-ABLE	LENGTH OF TEST HOURS	Completion			Special					
								TYPE OF TEST - (X)	Scheduled ☒ X	Completion ☐						
E.S. Adkins	3	M	5	20	37	3-21-98	F	2" W0	242	M	24	0	0	0	104	
T. Anderson	1	K	8	20	37	3-17-98	F	2" W0	0	M	24	0	0	0	0	
T. Anderson	2	N	8	20	37	3-17-98	F	2" W0	80	M	24	68	0	0	413	
H.W. Andrews	1	D	12	20	36	3-21-98	F	2" W0	22	MMU	24	0	0	0	143	
H.W. Andrews	3	H	11	20	36	3-22-98	P	2" W0	0	MMU	24	0	0	0	52	
H.W. Andrews	6	M	12	20	36	3-13-98	P	2" W0	34	M	24	4	0	0	222	
H.W. Andrews	15	L	12	20	36	3-14-98	P	2" W0	9	MMU	24	1	0	0	389	
W.P. Byrd Gas Com	1	F	12	20	36	3-22-98	P	2" W0	50	M	24	0	0	0	533	
W.P. Byrd Gas Com	2	O	12	20	36	3-18-98	P	2" W0	100	M	24	0	0	0	169	
J.W. Cooper "C"	3	(2)	3	20	37	3-17-98	F	2" W0	20	M	24	0	0	0	3	
J.W. Cooper "F"	2	(4)	3	20	37	TA'D				M						
M.E. Gaither <i>Remains Gas</i>	1	I	34	19	36	3-22-98	F	2" W0	30	M	24	0	0	0	173	
H.L. Houston	3	B	7	21	36	3-17-98	P	2" W0	22	MMU	24	1	0	0	134	

Instructions:

During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowables when authorized by the Division.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60 °F. Specific gravity base will be 0.60.

Report casing pressure in lieu of tubing pressure for any well producing through casing.

I hereby certify that the above information is true and complete to the best of my knowledge and belief.

Bill Petree
Signature

Bill Petree / Operations Technician
Printed name and title

3-25-98
Date
(505)393-2144
Telephone No.

(See Rule 301, Rule 1116 & appropriate pool rules.)

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

42219
(B)

GAS - OIL RATIO TEST

Operator		Pool		County		LEA							
AMERADA HESS CORPORATION		EUMONT YATES SEVEN RIVERS QUEEN (GAS)											
Address		TYPE OF TEST - (X)		Completion		Special							
POST OFFICE DRAWER D, MONUMENT, NM 88265		Scheduled ☒		Special ☐									
LEASE NAME	WELL NO.	LOCATION			DATE OF TEST	CHOKE SIZE	TBQ. PRESS.	DAILY ALLOW-ABLE	LENGTH OF TEST HOURS	PROD. DURING TEST		GAS - OIL RATIO CU.FT/BBL.	
		U	S	T						R	WATER BBL.S.		GRAV. OIL
E.S. Adkins	✓3	M	5	20	37	02-13-97	2" W0	320	M	24	0	0	139
T. Anderson	✓1	K	8	20	37	02-03-97	2" W0	23	M	24	0	0	1
	2	N	8	20	37	02-03-97	2" W0	32	M	24	0	0	0
H.W. Andrews	✓1	D	12	20	36	02-13-97	2" W0	30	MWU	24	0	0	64
	✓3	11#	11	20	36	02-13-97	2" W0	27	MWU	24	0	0	60
	✓6	M	12	20	36	02-27-97	2" W0	32	M	24	2	0	248
W.P. Byrd Gas Com	✓15	L	12	20	36	02-27-97	2" W0	14	MWU	24	0	0	221
	✓1	F	12	20	36	02-13-97	2" W0	30	M	24	0	0	29
	✓2	0	12	20	36	02-13-97	2" W0	20	M	24	0	0	374
J. W. Cooper "D"	✓3	B(2)	3	20	37	02-13-97	2" W0	20	M	24	0	0	15
J. W. Cooper "F" "TA'D"	✓2	B(2)	3	20	37	TA'D	2" W0	30	M	24	1	2	82
M.E. Gaither	✓1	I	7	21	36	02-13-97	2" W0	18	MWU	24	4	0	222
L.L. Houston	✓3	H	7	21	36	02-02-97	2" W0	21	MWU	24	0	0	398
	4	B(2)	6	20	37	02-02-97	2" W0	40	M	24	20	0	408
L.M. Lambert	✓1	C	9	20	37	02-13-97	2" W0	35	M	24	0	0	315
V. Laughlin	✓2	A	9	20	37	02-13-97	2" W0	30	M	24	0	0	13
	4												

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(See Rule 301, Rule 1116 & appropriate pool rules.)

I hereby certify that the above information is true and complete to the best of my knowledge and belief.

Signature
Bill Petree

Printed name and title
Bill Petree Operations Technician

Date
03-05-97

Telephone No.
(505) 393-2144