)ISTRICT II 20. Deswer DD, Astocia, NM 88210

State of New Mexico Enery Ainerals and Natural Resources Department

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

MSTRICT HI 1000 Rio Bracos Rd., Astoc, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

		UIHA	NSPC	JHI UIL	AND NAT	OFINE GA	Wall XI			/	
AMERADA HESS CORPORA	TION							30025041	18 🗸		
irees		ורט פּנ	B265								
DRAWER D, MONUMENT,	NEW MEX	100 00	3203				NEW WA	TERFLOOD	UNITE	FECTIV	
w Well Change in Transporter of:						1/1/92. ORDER NO. R-9494 ALSO, CHANGE NAME FR. W.A. WEIR #3 TO					
ompletice 📙	Oil	Oil Dry Ges Casingheed Ges Condenses				OTH MONII	GE NAME MENT G/S	UNIT BLK. 13, #12.			
age in Operator	Campgness	U88 [_]	Condi			CITI HORO	112111 0,0				
nage of operator give same address of previous operator	 										
DESCRIPTION OF WELL AND LEASE SEL No. 13 Well No. Pool Name, Including					a Engados		Kind o	Kind of Lease		se Na	
NORTH MONUMENT G/SA						G/SA [·]		State, Federal or Fee			
cation	01(1)		<u> </u>				^		OUTH		
Unit Lotter	_ :66	0	. Foot Fr	rom The WES	Line	and198	Fe	et From The	UUIH	Line	
Section 35 Towash	n 19S		Range	36E	. NN	IPM. LE	Α			County	
Section 33 Townsh	<u> </u>		Kauge		, , , , , ,	** ****					
. DESIGNATION OF TRAI		R OF O	IL AN	ID NATU	RAL GAS	address to w	hich arrened	copy of this for	m is 10 be se	nt)	
TEXAS NEW MEXICO PI	PELTNE C	OF Conde						R, CO 8			
me of Authorized Transporter of Casis	ghead Cas		or Dry	Ges 🔲				copy of this for		พ) - co102	
NORTHERN NATURAL GAS			The second	Rge.			When	MAHA, NE	BKASKA	68102	
well produces oil or liquids, re location of tanks.	Unit	Sec. 35	Twp.	S 36 E	ts gas accusa	Commedical	l wike	•			
his production is commingled with the					ing order num	xer:					
. COMPLETION DATA		100.50	 1 -		Y 32 91.0	77	1 5	Plug Back	Cama Dac'y	Diff Res'v	
Designate Type of Completion	- (X)	Oil Wel	1 j	Gas Well	New Well	Workover	Deepen	Flug Back	24THC IVER A	1	
te Spudded	Date Com	pl. Ready t	o Prod.		Total Depth		<u> </u>	P.B.T.D.			
Annual Control of Control of Production Control of Cont					Top Oil/Gas Pay			Tubing Depth			
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					• •			regulg pepar			
erforations					L,			Depth Casin	g Shoe		
			=:=								
TUBING, CASING ANI HOLE SIZE CASING & TUBING SIZE					DEPTH SET			SACKS CEMENT			
TIOLE GILL		3110 6 1	OBING	1 3126	<u> </u>	DEP IN SE			SACKS CEN	ENI	
					}			_			
. TEST DATA AND REQUI	ST FOR	ALLOW	ABLI	Ē	1						
IL WELL (Test must be after					t be equal to o	r exceed top a	llowable for t	is depth or be	for full 24 ho	urs.)	
hate First New Oil Run To Tank	Date of To	est			Producing M	lethod (Flow,	pump, gas lift,	etc.)			
ength of Test	Tubing Pr	Tubing Pressure				rure .		Choke Size			
Actual Prod. During Test		Oil - Bbis.				Water - Bbla.					
Actual Llog: Drilling 14th	Oil - Bbis								Gaz- MCF		
GAS WELL		 ,			.1	······································	· · · · · · · · · · · · · · · · · · ·		-		
Actual Prod. Test - MCF/D	· — 				Bbis. Condensate/MMCF			Gravity of Condensate			
esting Method (pitot, back pr.)	TOUR							, , , , , , , , , , , , , , , , , , ,			
and transfer (back teet b.)	Method (pisot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
L OPERATOR CERTIFI	CATE O	FCOM	DIIA	NCE							
I hereby certify that the rules and re-	nd at lone of the	· OH C				OIL CC	NSER	/ATION	DIVISI	ΩN	
Division have been complied with a is true and complete to the best of m	ed that the late			ove		•			-9-5	~~	
() (77)		veher,)		Dat	e Approv	/ed			11	
* * * * * * * * * * * * * * * * * * *	7	1	1			• •					
ROBERT L. WILLIAMS.	JR.	CIIULI	WIT	NDEN-	By.	SIRCE LOS	A See Sec	· Alvace			
Printed Name 1/1/92	<u> </u>		Title			-	40 40 T	. * Y30{			
1/1/92 Date		<u>505</u> -	<u>-393-</u>	2144	Title	9					
		T	elephon	No.							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes. 4) Separate Form C-104 must be filed for each pool in multiply completed wells.