Form C-104 Revised February 10, 1994 Instructions on back

5 Copies

Title

Dale

Energy, Minerals & Natural Resources Department PO Box 1980, Hobbs, NM \$3241-1980 District II PO Drawer DD, Artesla, NM \$8211-0719 OIL CONSERVATION DIVISION District III Submit to Appropriate District Office PO Box 2088 Santa Fe, NM 87504-2088 1000 Rlo Brazos Rd., Aztec, NM \$7410 District IV ☐ AMENDED REPORT PO Box 2088, Santa Fe, NM 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator name and Address OGRID Number AMERADA HESS CORPORATION DRAWER D 000495 MONUMENT, NEW MEXICO 88265 Reason for Filing Code API Number Pool Name Pool Code 30 - 025-04122 EUNICE MONUMENT G/SA 23000 Property Code Well Number 000135 NORTH MONUMENT G/SA UNIT BLK. 13 Surface Location II. Ul or lot no. Section Range Lot.lda Feel from the North/South Line | Feet from the East/West Ene County 35 198 36E 660 NORTH 11 Bottom Hole Location 660 LEA UL or lot no. Section Township Lot Ida Feet from the North/South fine Feet from the Fast/West line 12 Lee Code 12 Producing Method Code 14 Gas Connection Date 11 C-129 Permit Number 16 C-129 Effective Date 17 C-129 Expiration Date III. Oil and Gas Transporters Transporter "Transporter Name " POD 11 O/G " POD ULSTR Location and Description TEXAS-NEW MEXICO PIPELINE 22628 UNIT F, SEC. 35, T19S, R36E 20610 0 1670 BROADWAY NMGSAU BTRY. NO. 51 DENVER, COLORADO 80202 WARREN PETROLEUM COMPANY 24650 UNIT F, SEC. 35, T19S, R36E 2807099 P.O. BOX 1589 GAS SOLD THROUGH WARREN METER TULSA, OKLAHOMA NO. 07 AT BTRY. NO. 51 V. Produced Water UNIT F, SEC. 35, T19S, R36EPOD ULSTR Location and Description WATER DISPOSED BY RICE ENGINEERING AT BTRY. 51. V. Well Completion Data Boud Date H Ready Date * PBTD " Perforations " Hole Size H Casing & Tubing Size " Depth Set n Sacks Cement VI. Well Test Data Date New Oll M Gas Delivery Date * Test Date " Test Length " The Pressure " Cag. Pressure " Choke Size " Oll · Gm 4 AOF Test Method " I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my OIL CONSERVATION DIVISION knowledge and belief. Signature Approved by: Printed name: R.L. WHEELER, Title C. JUISTANIOR Title: ADMIN. SVC. COORD Approval Date: JUN 20 1994 Phone: (505) 393-2144 " If this is a change of operator fill in the OGRID number and name of the previous operator Previous Operator Signature Printed Name

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED AMENDED REPORT AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or despened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

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

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filled for each pool in a multiple completion.

improperly filled out or incomplete forms may be returned to operators unapproved.

- 1. Operator's name and address
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include volume requested)

If for any other reason write that reason in this box.

- 4. The API number of this well
- 5. The name of the pool for this completion
- 6. The pool code for this pool
- 7. The property code for this completion
- R The property name (well name) for this completion
- 9. The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- 11. The bottom hole location of this completion
- Lease code from the following table:

 F. Federal
 S. State
 P. Fee
 J. Jicarilla
 N. Navajo
 U. Ute Mountain Ute
 I. Other Indian Tribe 12.

- 13. The producing method code from the following table: . Flowing Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a 14. gas transporter
- 15. The permit number from the District approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this completion 18.
- MO/DA/YR of the expiration of C-129 approval for this 17. completion
- 18. The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- 21. Product code from the following table: Gas

- T! a ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.)
- The POD number of the storage from which water is moved from this property, if this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 23.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. Inside diameter of the well bore
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and
- Number of eacks of coment used per casing string 33

The following test data is for an oil well it must be from a test conducted only after the total volume of toad oil is recovered.

- 34. MO/DAYR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- 37. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- 40. Diameter of the choke used in the test
- Barrels of oil produced during the test
- 42. Barrals of water produced during the test
- 43. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.
- 45. The method used to test the well: F Flowing
 P Pumping
 S Swabbing
 If other method please write it in.

- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report 46.
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 47.

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