

DATE RECEIVED	
DATE OF FILING	
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DATE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form OCS-1
Supersedes OCS-100
Effective 1-1-65

AMERADA HESS CORPORATION

Address P. O. BOX 591, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain) CHANGE NAME FROM AMERADA DIV. AMERADA HESS CORPORATION TO: AMERADA HESS CORPORATION EFFECTIVE AUG. 1, 1971
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐	Coalinghead Gas ☐ Condensate ☐
Change in Ownership ☐	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name H. W. Andrews	Well No. 3	Pool Name, including Formation Monument Grayburg San Andres	Kind of Lease Surface, Federal or Fee Federal	Lease No. 10046164
Location Unit Letter H ; 1980 Feet From The North Line and 660 Feet From The East Line of Section 11 Township 20S Range 36E , NE1/4, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ ARCO Pine Line Co.	Address (Give address to which approved copy of this form is to be sent) Box 1978, Roswell, New Mexico 88201					
Name of Authorized Transporter of Coalinghead Gas ☐ or Dry Gas ☐ Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 11	Twp. 20S	Range 36E	Is gas actually connected? Yes	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion -- (X)	Oil Well	Gas Well	New Well	Workover	Drillopen	Plug Back	Case Revert	Drill
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.E.T.D.			
Horizons (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

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of head oil and must be equal to or exceed top of
able 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/MCF	Gravity of Condensate
Testing Method (piston, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

OIL CONSERVATION COMMISSION

APPROVED AUG 18 1971

BY *John W. [Signature]*
Geologist

TITLE

This form is to be filed in compliance with rule 1-1006.

If this is a request for allowable for a newly drilled or old
well, this form must be accompanied by a tabulation of the test
results taken on the well in accordance with rule 1-111.

All sections of this form must be filed not completely for
this form is to be filed in compliance with rule 1-1006.

[Signature]
PRODUCTION RECORDS SUPERVISOR
(initial)

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AUG 12 1971

OIL CONSERVATION
HOBBS, NM