District I PO Box 1980, Ho District II PO Drawer DD, District III 1000 Rio Brazos	Artosla, N	TM 88211-0719		EDETRY, Milber	W Mexico IN Received Department TION DIVISION x 2088 1 87504-2088			Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies							
District IV PO Box 2083, Stata Fe, NM \$7504-2083												NDED REPORT			
I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT															
AMEDAL	C CODDOD	H				<sup>2</sup> OGRID Number									
AMERADA HESS CORPORATION DRAWER D									000495 Resson for Filing Code						
MONUME					-										
	H Number	, ,		<sup>1</sup> Pool Name						RC ' Pool Code					
<b>30 · 0</b> 25-04230			EUMONT YATES 7RQ								76480				
Property Code			* Property Name									il Nember			
000075		Location	H.W. ANDREWS						6						
II. <sup>10</sup> Surface Location Ut or bot no. Section Township Range Lot.Ids Feet from the North/South Line Feet from the East/West Ene County											Consty				
M 12 20S			36E 660			SOUTH			660	660 WEST LEA					
. <sup>11</sup> B	lottom	Hole Loc	ation	tion			<u> </u>			UUU I WESI I		LEA			
UL or lot no.	Section	Township	Range	Lot Id <b>n</b>	Feet fro	na the	North/Se	oth line	Feet from the	Fast/We	si line	Consty			
" Lee Code	<sup>10</sup> Produc	ing Method Co	·	Consection Da	le "C	-129 Permi	i Number		C-129 Effective	Date	" C-L	29 Expiration Date			
	F	Transport	the second s	2-94					an a tha a sea or a station of a sea o						
	III. Oil and Gas Transporters   "Transporter "Transporter " DO " O/G " POD ULSTR Location														
OCRID		***	and Addres	and Address						and Description					
024650		ARREN PE .O. BOX (		COMPANY	10.111			G				OCATED IN -20S, R-36E			
T. S. A.	2.6.1.2	ULSA, OK								JEU. 1	2, 1	-203, K-30E			
			-												
			Patro							- Martine and a surger by Same					
			<u></u>												
IV. Produ	ced W	ater							and a state of the second s						
Pi H				UCED INT		POD ULS	TR Locat	on and D	escriptica						
		<u>ISEL A</u>	T WELL	LOCATION	& HAU	LED TO	DISP	OSAL.	UNIT M, SI	EC. 12	. T-2	20S, R-36E.			
V. Well C		tion Data													
Space Space	U LIE		<sup>4</sup> Ready Da	le		" TD			* PBTD			Perforations			
K	Hole Size		- 19-94 " Casing & Tubing Size			" Depth Set			Zaran in the second contained and the second s		178'-3370' "Sicks Cessent				
				13"			19		and a second		REVIOUSLY RAN				
			8-5/8"			2360'					EVIOUSLY RAN				
			6-5/8"			3754'			PREVIOUSLY						
		2-3/	2-3/8" TUBING			341			<u></u>	,					
VI. Well 7												J			
Date Ner	w Oùl		lvery Date		I Date		Test Len		* Tog. Pr	347 FE	. *	Cag. Pressure			
"Choke	Size	12-2	2-94	· 1-19-9		24	HOUR	5	nain ar an ainmanan mar						
CLUTT OLLE		1	-0-		<sup>a</sup> Water 20		<b>« сы</b> 165		" AOF		1	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 knowledge and belief.						OIL CONSERVATION DIVISION									
Signature: A DII Approved by:															
Printed name: R. L. Wheeler, Jr.							Tide: DISTRICT I SUPERVISOR								
Admin. Svc. Coord.							DISTRICT I SOPERVISOR								
Doue: 1-20-	Dete: 1-20-95 Phone: 505 393-2144								Approval Date: JAN 2 7 1995						
" If this is a char	Contraction of the local division of the loc	rator fill in the	OCRID num	ber and name o	of the previ	ous operatu	r								
Printed Name Title Date															
									· •			I.			

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## New Mexico Oil Conservation Division C-104 Instructions

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IF T	HIS IS AN AMENDED REPORT, CHECK THE BOX LABLED	22.	The INCTO face of the face of the face
Repo	oft all das volumes at 15.025 PSIA at 604		T'e 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.)
A reco	real of volumes to the nearest whole barrel, quest for allowable for a newly drilled or deepened well must be mpanied by a tabulation of the dariation to to some the second	23.	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 easign a number and write it here.
All	rdance with Rule 111. actions of this form must be filled out for allowable requests on and recompleted wells.	24.	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" ato 1
	ut only sections I, II, III, IV, and the operator certifications for ges of operator, property name, well number, transporter, or such changes.	25	
		25. 2 <b>6</b> .	MO/DA/YR drilling commenced
com	parate C-104 must be filed for each pool in a multiple	27.	MO/DA/YR this completion was ready to produce Total vertical depth of the well
Impr	operly filled out or incomplete forms may be returned to	28.	Plugback vertical depth
1.	Operator's name and address	29.	Top and bottom perforation in this completion as and
2.	Operator's OGRID number. If you do not have see to up		
•	ce beergried and lined in by the District office.	30.	Inside diameter of the well bore
3.	Reason for filling code from the following table:	31. 32.	Outside diameter of the casing and tubing
	RC Recompletion CH Change of Operator	32.	Depth of casing and tubing. If a casing liner show top and bottom,
	CO Change oil/condensate transporter	33.	Number of sacks of cament used per casing string
	CG Change des transporter	The fo	llowing test date is for an oil wall to much the
	fequeradi	34,	cted only after the total volume of load oil is recovered. MO/DA/YR that new oil was first produced
4.	If for any other reason write that reason in this box. The API number of this well	35.	MO/DA/YR that gas was first produced into a pipeline
5.	The name of the pool for this completion	36.	MO/DA/YR that the following test was completed
8.	The pool code for this pool	37.	Length in hours of the test
7.	The property code for this completion	38.	Flowing tubing pressure - oil wells
8.	The property name (well name) for this completion	39,	Shut-in tubing pressure - gas wells
9.	The well number for this completion		Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
10.	The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that purchases that for the second	40.	Diameter of the choke used in the test
	for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.	41.	Barrels of oil produced during the test
11.	The bottom hole location of this completion	42.	Barrels of water produced during the test
12.	Lesse code from the following table:	43.	MCF of gas produced during the test
	S State	44. 45.	Gas well calculated absolute open flow in MCF/D
	P Fee J Jicarilla N Navajo	40.	The method used to test the well: F Flowing P Pumping
	U Uta Mountain Uta I Other Indian Tribe		P Pumping S Swabbing If other method please write it in.
13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift	46.	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
14.	MO/DA/YR that this completion was first source to	47.	
15.	gas transporter The permit number from the District approved C-129 for this completion	47.	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 determined on longer
16.	MO/DA/YR of the C-129 approval for this completion		operates this completion, and the date this report was signed by that person
17.	MO/DA/YR of the expiration of 0 100 minutes		
10			
18. 19.	The gas or oil transporter's OGRID number		
20.	Name and address of the transporter of the product	<del>.</del> .	
	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.	ی م	
21.		<b>.</b>	
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