Submit 5 Copies
Appropriate District Office O. Box 1980, Hobbs, NM 88240

State of New Mexico E. y, Minerals and Natural Resources Departmet

HCT R Newer DD, Asseda, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

TRICT III O Rio Berron RA., Artec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator								Wall 7	PI No.				
AMERADA HESS CORPOR	RATION				 				3002	2505641			
Address D. MONUMENT	NEV 1451									,			
DRAWER D. MONUMENT. Resson(s) for Filing (Check proper has		KICO 88	3265	-	ΙX	<u> </u>	- (Plane I						
New Well	•	Change in	Tonesco	where out:	W	OUR	f (Please explo	wy					
Recompletion	Oil		Dry Ce			ΕI	FFECTIVE	11-01-9	93.				
Change in Operator	Casinghe	~~	Conde					0- 3					
If change of operator give same													
and address of previous operator											*************************************		
II. DESCRIPTION OF WEL			,										
The state of the s					ol Name, Lochiding Formation EUNICE MONUMENT G/SA				Kind of Lease State, Federal or Fee		Lease No.		
	costice					I G	/ SA	Scar,	Same, Faccial of Fac				
Unit Letter C	F	560		N	ULTOU		100	0		UECT			
Unit Letter	:		Feet Fr	rom The	OKIII	Line	and198	Fe	et From The.	MESI	Line	1	
Section 19 Town	ship 19	9S	Range	3	7E	, NN	ирм,	LI	EΑ		County		
										·			
III. DESIGNATION OF TRA				D NATU	RAL G	AS	- 						
EOTT OIL PIPELINE O	1 / 1	or Condea	sace.		Address (Give address to which approved P.O. BOX 4666, HOUSTON,								
Name of Authorized Transporter of Ca			or Dry	Ge C	P.U.	BU.	X 4666,	HOUSTON	, IEXAS	//210-4	1666		
WARREN PETROLEUM CO	•				Address (Give address to was P.O. BOX 1589,			uch approved TIII SA — (7 <i>copy of thus f</i> 1Κ 7Δ1Ω	orm us lo be se 2	u io be sem)		
y wall produces oil or liquids.	Unit	Sec.	Тмр.	Rge.	Is gas actually connected?			When 7					
rive location of tanks.	<u>i</u> A	19	198	37E		·		1	•				
If this production is commingled with the	sat from any or	ther lease or	pool, giv	ve comming	ling order	aumi	er:	· · · · · · · · · · · · · · · · · · ·					
IV. COMPLETION DATA		100 91 11			γ			γ	·	·	······································		
Designate Type of Completic	on - (X)	Oil Well	- '	Gas Well	New	Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Con	npl. Ready to	Prod		Total D	epth		<u> </u>	P.B.T.D.	<u> </u>	<u> </u>		
		,				•			F.B. 1.D.				
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Cas Pay				Tubing Depth				
Perforations													
r did aloue									Depth Casin	g Shoe			
		TUDDIC	CACE	10 115	CT1 (5				<u> </u>				
HOLE SIZE					CEMENTING RECORD								
11000 0100		CASING & TUBING SIZE					DEPTH SET		SACKS CEMENT				
					 				 				
					†				 				
									 				
V. TEST DATA AND REQU OIL WELL (Test must be als									<u> </u>				
OIL WELL (Test must be after Date First New Oil Rus To Tank	Date of T	lotal volume	of load	oil and musi	be equal	10 or	exceed top all	owable for thi	s depth or be	for full 24 how	rs.)		
•	Date of 1	CM.			Producti	ng Me	thod (Flow, pr	emp, gas lift, i	itc.)				
Length of Test	Tubing Pr	Tubing Pressure				resau	re		Choke Size				
		Oil - Bbls.											
Actual Prod. During Test	Oil - Bbla					Bble			Gu- MCF				
	i				<u></u>		**						
GAS WELL Actual Prod. Test - MCF/D											* ***		
Actual Prof. 188 - MCP/D	Length of	Test			Bols. Co	oden	HE/MMCF		Gravity of C	ondrouse	- · · · · · · · · · · · ·		
Tosting Method (pilot, back pr.)	Tibing B	Tubing Pressure (Shut-in)											
, , , , , , , , , , , , , , , , , , ,	ruolag ri					Tesau	re (Shut-in)		Choke Size				
VL OPERATOR CERTIFI	CATEO	E COL ID		Cr	·				<u> </u>				
I bereby certify that the rules and re-	INIMIONS of the	COMP	LIAN	ICE	1	\boldsymbol{c}	JII CON	ICEDV	ATION	רוו ווכוכ	NA 1		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION								
is true and complete to the best of m	y knowledge i	and belief.				ata	Approve	NOV	1 8 1993				
X 4	6 41	,				alt	Approve	u					
Signature Accessed						V	Ozigik	AI CIMEIN	D DM 4==				
TERRY L. HARVEY STAFE ASSISTANT						By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR							
Printed Name			Title		+	HIA			JUTERVISI	UK			
10-29-93 Data		(505) 3			ll '	itle .							
		Telep	obons N	0.	II.								

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.