State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II P.O. Drawer DD, Astonia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos R4., Aziec, NM \$7410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

l. O]	O TRA	<u> NSF</u>	ORT OIL	AND NA	<u> TURAL</u>	.GA		·			
Operator AMEDADA HESS CORDODATION						Well API No.						
AMERADA HESS CORPORATION Address	JN							300	<u>)2505661</u>			
DRAWER D, MONUMENT, NEV	MEXICO	882	65									
Reason(s) for Filing (Check proper box)					X Oth	er (Please	explai	NMG/S	SA UNIT	FFFFCTI	VE 1/1/92	
New Well		Change in			OR	DER N	0. R	-9494 V	WELL FOR	MERLY O	PERATED	
Recompletion	Oil		Dry (ВҮ	GRAC	E PE	TROLEUN	M AS NEW	MEXICO	D STATE	
Change in Operator L	Casingheed	Ges	Cond		#1	•						
f change of operator give name and address of previous operator	 -										· · · · · · · · · · · · · · · · · · ·	
II. DESCRIPTION OF WELL	AND LEA	SE										
Lease Name BLK. 6 Well No. Pool Name, Inclu									of Lease No.			
NORTH MONUMENT G/SA UNI	IT 8 EUN			NICE MOI	E MONUMENT G/SA				Federal or Fe	● B-2	209-16	
Location	100	00		A 1/	30TU		_				57	
Unit LetterH	: 198	5U	_ Feet !	From The $\frac{N}{N}$	JKIH Lin	e and	6	<u>60 </u>	et From The	WES	Line	
Section 20 Township	198		Rang	• 37E	. N	MPM.			1	EA	County	
						V88 6784			<u></u>	<u>LA</u>	COURT	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTEI			ND NATU					·			
SCURLOCK PERMIAN CORPOR	RATTON	or Conde							copy of this j			
Name of Authorized Transporter of Casinghead Gas X or Dry Gas					P.O. BOX 4648, HOUSTON, TX. 77210-464 Address (Give address to which approved copy of this form is to be sent)						1648	
WARREN PETROLEUM COMPAN				, (OK. 7		ere)	
If well produces oil or liquids, rive location of tanks.	Unit	Sec.	Twp.	Rge.	ls gas actual			When		7102		
	<u> </u>		<u> </u>		<u></u>			l				
f this production is commingled with that f IV. COMPLETION DATA	rom any othi	r lease or	pool, (rive comming!	ing order num	ber:						
		Oil Well	<u>- </u>	Gas Well	New Well	Worker		D	1 5 5	10		
Designate Type of Completion		İ			1	l works	rer	Doepea	Prog Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compi. Ready to Prod.				Total Depth				P.B.T.D.	P.B.T.D.		
Elevations (DE BYD BT CD)	<u> </u>									1		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth			
Perforations					L				Depth Casing Shoe			
									Depui Casi	ng Snos		
TUBING, CASING AND						CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				T	SACKS CEMENT		
	 									 .		
									- -		· · · · · · · · · · · · · · · · · · ·	
V. TEST DATA AND REQUES	T FOR A	LLOW	ABLI	Ē	L							
OIL WELL (Test must be after no Date First New Oil Rus To Task	Date of Tes	al volume	of loss	d oil and must	be equal to o	exceed to	op allo	vable for th	is depth or be	for full 24 ho	urs.)	
Date I Har I NEW OIL ROLL TO LONG	Producing Method (Flow, pump, gas lift, etc.)											
Length of Test	Tubing Pressure				Casing Press	ure			Choke Si-	Choke Size		
	ual Prod. During Test Oil - Bbls.				Water - Bbls.				0.02			
Actual Prod. During Test									Gas- MCF	Gas- MCF		
CACTUEL	L											
GAS WELL Actual Prod. Test - MCF/D	II assat 27	V					_					
	Length of Test				Bbis. Condensate/MMCF				Gravity of	Gravity of Condensate		
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)				A-l- 8:-			
	ļ		•			-es land.	-=/		Choke Size	•		
VI. OPERATOR CERTIFIC	ATE OF	COMI	PLIA	NCE	1[_l			
I nergoy certify that the rules and monit	wines of the	O# C				OIL C	ON	SERV	ATION	DIVISI	ON	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					JAN 07'92							
V) (()) Ma)			Date	Appr	ovec	.	JAN U	92	_	
HAY WID		L			 ,;	- -				* FOT . *		
Signature ROBERT WILLIAMS JR	. UNIT	KILDER	ידואזכ	ENDENT	By_	47.3		A. e. P		1.8 OM		
Printed Name			Title	LNUEN!	 				,			
1/06/92 Date	505-	<u> 393-21</u>	144		Title							
		Tel	ephone	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.