1980, Hobbs, NM 88240

)ISTRICT II 20. Drawer DD, Astonia, NM 88210

State of New Mexico Energy inerals and Natural Resources Department Perm C 101 Revised 1-1-89

## **OIL CONSERVATION DIVISION** P.O. Box 2088

Santa Fe, New Mexico 87504-2088

)|STRICT |||| |000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

	<u> </u>	UTHA	NOPU	MI OIL	110 1171	, , , , , , , , , , , , , , , , , , ,	7	val api	No.			
AMERADA HESS CORPORA	TION								3002505	568		
7000		t C 0	0265									
DRAWER D, MONUMENT,	NEW MEX	100 8	8265		Other	(Please expla	in) NE	W WAT	ERFLOOD	-	FECTIV	
on(s) for Filing (Check proper box)		Change in	Transpor	rter of:	1/1/	92. OR	DER	NO.	K-9	494	F #1	
Well	Oil		Dry Gas	1 3	CHAN	IGE LEAS	E NA	ME &	NO. FR.	STATE F	- #1 #1	
empletion U			_ ` .	. (**)	T0 N	ORTH MO	NUME	NI G/	ZWEALUU ZW NNTI	BLK. 6	, #4.	
age of operator give same	XACU EX	PL. &	PROD.	INC.,	P.O. BOX	. /3U, H	IUBBS	, NEV				
equese of bisolone obstator												
DESCRIPTION OF WELL	AND LE	Well No.	Pool N	ame, Includin	g Formation			Kind of			No.	
NORTH MONUMENT G/SA		4	E۱	JNÍCE MO	NUMENT (	S/SA	l	State, F	ederal or Fee	B-16	551-9	
ation		- 0		NOF	חדם		660			WEST	• • •	
Unit Letter	_ :66	0	. Feet Pr	om The NOT	Line	bes		Feel	From The		Line	
Section 20 Townshi	. 19	9S	Range	37E	. NM	IPM,	LEA				County	
Section 2.0 Townshi	P		Kange									
DESIGNATION OF TRAN	SPORTE	R OF O	IL AN	D NATU	RAL GAS		<del></del>	=======================================		em is to be set		
me of Authorized Transporter of Oil	<u>Γ-λ</u>	or Coade	n sale		William Chia	ROX 26	vnich aj 48	HOUST	ON, TX	77001	-,	
SHELL PIPELINE CORP	JRATION COM		or Dry	Gen [	Address (Giw	address to w	vhich a	oproved	opy of this fo	rm is to be set	rd)	
ne of Authorized Transporter of Casis WARREN PETROLEUM CO		لما	u D.,		P.0.	BOX 15	89,	TULSA	OK 74	102		
veil produces oil or liquids,	Unit	Sec.	Twp	Rge.	le gas actually	connected?	-	When	7			
location of tanks.	. <b>i</b>	<u> </u>	<u>L</u>		<u></u>	<del></del>		<b>l</b>				
is production is commingled with the	from any ot	her lease or	r pool, gi	ive comming!	ing order numb	er:						
COMPLETION DATA		Oil We	<u>.                                      </u>	Gas Well	New Well	Workover	D	eepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	ı - (X)	İ			İ		<u>i</u> _		,	<u> 1</u>	<u> </u>	
to Spudded	Date Con	npl. Ready	to Prod.		Total Depth				P.B.T.D.			
vations (DF, RKB, RT, GR, etc.)	COL BED BY CB at 1 Name of Brokering Countries				Top Oil/Gae Pay				Tubing Depth			
venom (Dr. Krb. Ki. CK. ac.)	) Name of Producing Formation											
riorations										Depth Casing Shoe		
							<del></del>		<u>                                     </u>			
		TUBING, CASING AND								Ot over optimize		
HOLE SIZE	<u>C</u>	CASING 4 TUBING SIZE				DEPTH SET				SACKS CEMENT		
	_								- <del> </del>			
	_	<del></del> -		<del></del>	· <del> </del>				\ <del></del>			
TEST DATA AND REQU		_		-								
IL WELL (Test must be after the First New Oil Run To Tank	Date of		ne of loa	d oil and mus		r exceed top lethod (Flow			<del></del>	for full 24 ho	AES.)	
	Date Of	ICM			T todacing is	season (r tow	, purip,	gus 191,	<b>e</b> ic. <i>)</i>			
ength of Test	Tubing	Tubing Pressure				Casing Pressure				Choke Size		
ctual Prod. During Test	_									Gai- MCF		
ctual Floir During 1 and	Oit - Be	Oil - Bbie.				Water - Bbls.				Our MCh		
GAS WELL												
Actual Prod. Test - MCF/D	Length	of Test			Bbls. Cond	ensate/MMCI	F		TGAVIIV A	Condenuale	<del></del>	
									1			
seting Method (pitot, back pr.)	Tubing	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
		<del></del>										
L OPERATOR CERTIF	ICATE (	OF CON	<b>MPLL</b>	ANCE			~ N 1 C		/ A T I O A			
I hereby certify that the rules and re Division have been complied with a	and that the i-	of commercian	-	0	11	OIL C	SMC	EH/		I DIVISI	<del>-</del>	
is true and complete to the best of	my knowledg	e and belief	guve <b>n ab</b> [.	OVE			-		JAI	N 09'92	2	
11 / (1/1) 2/	$\mathcal{V}$	` <i>`</i>			Da	te Appro	ved				<del></del>	
Let Jel 13	<u> </u>					<b>A 2</b> • A • •						
ROBERT L. WILLIAMS.	.1R	Clibe	UNI	T T T T T T T T T T T T T T T T T T T	∥ Ву	DRIGI	NAL S	IGNED	BY JERRY	SEXTON		
Printed Name	<u>-V// a</u>	JUPE	KINI Tid	ENDENT_			215T	KICT I	SUPERVISC	R		
1/1/92 Date			-393	-2144	Titl	6						
			Telephor		11							

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.