Revised 1-1-89

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drewer DD, Astosia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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AMERADA HESS CORPORATION								300250575	04		
DRAWER D, MONUMENT, N	EW MEXIC	0 882	265							<u> </u>	
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na in Operator 🔯	Casingheed G	>= 🔲 С	condense:					G/SA UN	II REK	10, #9	
ness of operator give same MAR	TO NOHTA:	L COMP	YANY,	P.0.	BOX 552,	MIDLANG), TEXAS	79702			
address of previous operator	MELEAC	· F									
DESCRIPTION OF WELL A BLK.		Vell No. P	ool Nan	ne, lectuding	e Formation		Kind of		Les	se No.	
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ation											
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	100			37E			LEA			Country	
Section 30 Township	, 198		Range	3/L	, NMPI	<u>4, </u>				County	
DESIGNATION OF TRANS	SPORTER	OF OII	LAND	NATUE	RAL GAS						
me of Authorized Transporter of Oil	<u> </u>	or Condens	ate [Address (Give a	idress to w i	hich approved (copy of this form DCA QC	n is to be ser 1202	u)	
TEXAS NEW MEXICO PIPE	ELINE CO				Address (Give a			$\frac{R, CO}{com} = \frac{8C}{com}$			
ime of Authorized Transporter of Casing			or Dry C	#1 []	P O F	OX 158	9. TULSA	, OK 741	.02	-,	
WARREN PETROLEUM COMP		Sec.	Twp.	Roe	is gas actually o		When				
wait produces ou or inquies, /e location of tanks.		¦	·-r								
his production is correningled with that i	from any other	r lease or p	ool, giv	e commingli	ng order number						
. COMPLETION DATA		Y =	<u>-</u>		γ γ:			Plug Back S	- Dae'y	Diff Res'v	
Designate Type of Completion	- (X)	Oil Well	G	ias Well	New Well 1	Norkover	Deepen	l Lin g Rack i s	ame Kes 4	I NELV	
ate Spudded	Date Compl.	. Ready to	Prod.		Total Depth		_1	P.B.T.D.		-1	
	1										
evations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing For	rmation		Top Oil/Gas Pay			Tubing Depth			
					<u> </u>			Depth Casing	Choo		
erforations								Depai Casing	Sikk		
	71	HRING	CASI	NG AND	CEMENTIN	G RECO	RD	<u> </u>			
HOLE SIZE		SING & TU			 	EPTH SE		S	SACKS CEMENT		
TIOLE GILL	0.0	<u> </u>	<u> </u>			CI III OL		-			
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	1										
. TEST DATA AND REQUE	ST FOR A	LLOW	ABLE								
OIL WELL (Test must be after t			of load	oil and must	i be equal to or e	xceed top a	Howable for th	is depth or be fo	or full 24 ho	ers.)	
	1	•									
Date First New Oil Run To Tank	Date of Tes	-			Producing Met	hod (Flow,	pump, gas lift,	elc.)			
					Producing Met	•	pump, gas lift,	•			
	Date of Tes					•	pump, gas lift,	Choke Size			
Length of Test					Producing Met	•	pump, gas lift,	•			
Length of Test	Tubing Pres				Producing Met Casing Pressur	•	pump, gas lift,	Choke Size			
Length of Test Actual Prod. During Test	Tubing Pres				Producing Met Casing Pressur	•	pump, gas lift,	Choke Size			
Length of Test Actual Prod. During Test	Tubing Pres	#Sure			Producing Met Casing Pressur	e		Choke Size	onden sate		
Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Tubing Pres	agure Test			Casing Pressur Water - Bbis. Bbis. Condens	e ale/MMCF		Choke Size Gas- MCF Gravity of C	ondensate		
Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Tubing Pres	agure Test	(-m)		Casing Pressur Water - Bbls.	e ale/MMCF		Choke Size	ondensate		
Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Lesting Method (pilot, back pr.)	Oil - Bbls. Length of 1 Tubing Pre	asure Test			Casing Pressur Water - Bbis. Bbis. Condens	e ale/MMCF		Choke Size Gas- MCF Gravity of C	onden sate		
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Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regr	Tubing Pres Oil - Bbls. Length of 1 Tubing Pre	Test COMP	PLIA!		Casing Pressur Water - Bbis. Bbis. Condens Casing Pressur	e nte/MMCF re (Shut-in)		Choke Size Gas- MCF Gravity of C		ON	
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TRUCTIONS: 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 with Rule 111.
- 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.