Subset 3 Comes
Appropriate Dutters Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drown DO-Assois, 104-88210

nergy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION P.O. Box-2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TRANSPORT OIL AND NATURAL GAS

penua	AITO IVII	Well API No. 300250577600									
merada Hess Corporatio					· · · · · · · · · · · · · · · · · · ·		. 3002		-		
. 0. Box 2040, Tulsa,		Change in 1	Transpo		Cha	inge of c	perator	effecti	ve 6/1/9	)1	
change in Operator X	Casinghead	<del></del>	Conde		D			ما جن ما ط	Company		
ARCO P. O DESCRIPTION OF WELL	). Box 1	610. M	Comp Midla	and, Tex	Division (as 797)	1	intic Ri	chtield	Company		
J. R. Phillips "B"	Well No.   Pool N			ni Name, iscluding Formation Eunice Monument				Lesse Publik Mr For	_	Lease No.	
Unit Letter E	1650		Feet F	TOTE The N	orth Line	and330	) F•	et From The .	West	Line	
Section 31 Township 195 Ran			Range	Labore 37E NMPML				Lea County			
I. DESIGNATION OF TRAN	ISPORTE	R OF O	IL A!	D NATU	RAL GAS						
Texas New Mexico Pipel		or Conden			Address (CIN	ox 2528,					
ame of Authorized Transponer of Casinghead Gas  arren Petroleum Company			or Dr		P. O. Box 1589, Tulsa,			copy of this form is to be sent)			
Y well produces oil or liquids,	Unit		Twp	, -	is gas actuali Yes		When	ı <b>r</b> Unkı	nown		
ve incition of thairs. This production is communicated with that	(rom any oth	31 er lease or		SI 37 E							
V. COMPLETION DATA		Oil Well		Gas Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		i	i		Total Depth	<u></u>	1	P.B.T.D.			
Date Spunded	Date Com	Date Compt. Ready to Prod.									
Elevanons (DF, RKB, RT, GR, etc.)	Name of P	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Periorauces								Depth Car	of Spot		
					CEMENT	NG RECO	RD		SACKS CEN	AENT	
HOLE SIZE	CA	SING & T	UBING	S SIZE		DEPTH SE	<u> </u>				
	F.							1			
V. TEST DATA AND REQUI	EST FOR	ALLOW	VABL	.E	be agred to a	e escand ion d	Homobie for U	his depth or b	e for full 24 ho	nes.)	
OIL WELL (Test must be after Date Fire New Oil Run To Tank	Due of T		4 0) 10	14 OU SAS ME	Producing I	deshad (Flow.	pump, gas lift.	, esc.)			
Length of Test	Tubing P	Tubing Pressure				Campg Pressure			Choke Size		
Actual Prod. Dunning Test	Oil - Bbi	Oni - Bbis.				i.		Gas- MC	Gas- MCF		
GAS WELL								Graviev	(Concentate		
Actual Prod. Test - MCF/D	Length	Leaguh of Tess				Bbis. Condensue/MMCF			, , , , , , , , , , , , , , , , , , ,		
Testing Method (puot, back pr.)	Tubing I	Tubing Pressure (Shut-m)				Casing Pressure (Shut-in)			Choke Size		
VL OPERATOR CERTIF						OIL CC	NSER		1 DIVISI		
Divisions have been computed with and that the information gives above in true and complete to the best of my knowledge and belief.					Da	Date Approved					
Tayun J. Wickell						By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR					
Signature Printed Name	· · · · · · · · · · · · · · · · · · ·		Ti	de Ca	_	le			ж		
Printed Name  R. L. Wicke	ett, Attor	ney-in-	Fact		-    '"						
Della IIIN A 9 4004 /	9181599-6	47 MM			- 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 with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 7. All sections is the file of the such changes of operator, well name or number, transporter, or other such changes.
   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.

MIN 07 199