Rubrust 5 Copies Appropriate District Office DISTRICT 3 F.O. Box 1980, Hobba, NSM 88240

State of New Mexico Eight 4, Minerals and Natural Resources Departmen

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

TO TRANSPORT OIL AND NATURAL GAS

<u>ICT M</u> Uo Brixos R4., Asiec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

AMEDADA HECC CODE	OODATION							
AMERADA HESS CORF	ORATION						3002	505798
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age is Operator		ed Gas 🔲			LITEUI	1 A L 11-	01-93.	
nage of operator give same address of previous operator _			•			* * * * * * * * * * * * * * * * * * * *		
								
DESCRIPTION OF WE	BLK. 17	Well No.	Door No	- laske	ling Formation			-
NORTH MONUMENT G/		13	1		ONUMENT G/SA	1	Kind of Lease State, Federal or Fee	Lesse No.
ation			1		ononem ay on			- !
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							LLA	Count
DESIGNATION OF TI	RANSPORTI	ROF O	IL ANI	D NATU				
EOTT OIL PIPELINE	COMPANY	Effective	74-11-04	2 P	Address (Give address to P.O. BOX 4666	o which appi HALIST	rowed copy of this for TNN TFYAC	m is to be sent) 77210 11666
ne of Authorized Transporter of t	Casinghead Gas		or Dry		Address (Give address s	o which app	oved copy of this for	m is to be sent)
NORTHERN NATURAL ell produces oil or liquids,		Y	r 	γ -	2223 DODGE ST	REET, (OMAHA, NEBRA	SKA 68102
location of teals.	Unit KC	Sec. 3 2 _	Т мр. 198	Rge. 37E	Is gas actually connected YES	17 1	Vhen ?	
s production is commingled with			pool, give	comming	ling order number:			· · · · · · · · · · · · · · · · · · ·
COMPLETION DATA					Y			
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rations (DF, RKB, RT, GR, etc.)	Name of F	roducing Fo	ecitame		Top Oil/Gas Pay		Tubing Depth	· · · · · · · · · · · · · · · · · · ·
	Name of F		ormation		Top Oil/Gai Pay			
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orations		roducing Fo	CASIN	G AND	CEMENTING REC			
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1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.