Submit 5 Copies Appropriate District Office Appropriate District Common District I DISTRICT I P.G. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Asteela, NM \$8210

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

	State of New Mexico
Er 🗌	v, Minerals and Natural Resources Department

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

Santa Fe, New Mexico 87504-2088

**REQUEST FOR ALLOWABLE AND AUTHORIZATION** 

		UTHA	NSPU		AND NAT		Val A	PI No.			
Openitor AMERADA HESS CORPORATION								3002505894			
drest	<u> </u>	<u>.</u>	265								
DRAWER D, MONUMENT		. LU 88	205		X Other	(Please explai	IN NEW WA	TERFLOO	D UNIT E	FFECTIV	
w Well		Chapter in Transporter of: 1/1/92. ORDER NO						. R-9494 .			
ompletion						E NAME F	AME FR. HUMBLE LAUGHLIN #1 ENT G/SA UNIT BLK. 22, #8.				
age in Operator	Casinghes	d Gan 🗹	Condense		101	NORTH MO	NUMENI	A/SA UN.	II BLK. 2	22, #8.	
ange of operator give name address of previous operator					·····						
DESCRIPTION OF WE	LL AND LE	ASE						<u></u>			
Nette B	LK. 22						Kind of Lease State, Federal or Fee		ase No.		
NORTH MONUMENT G/S	A UNII	8	EUN	ILE MUI	NUMENT G,	/ SK		·····	<u> </u>		
unit LetterH	. 16	50	Feet Pm	m The	ORTH Line	and 660		et From The	EAST	Line	
						1	EA			Course	
Section 4 Tor	vaship 20	5	Range	37E	<u>, NM</u>	1 <b>PM,</b> L.	.EA			County	
. DESIGNATION OF T	RANSPORTE	R OF O	IL'ANI	) NATUE	RAL GAS						
me of Authorized Transporter of		or Conden			Address (Give				form is to be so A 77001	ini)	
SHELL PIPELINE COE me of Authorized Transporter of C			or Dry (	3es []		BOX 2648			form is to be s	rnt)	
EI-PASO-NATURAL GA			licha		P <del>.0.</del>	<del>BOX 149</del> 2	P, EL PA	<del>so, tex</del>	<u>AS 79978</u>		
well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	is gas actually						
e location of tanks.	Н_	4	195	<u>37E</u>	YES		l		·····		
his production is commingled with . COMPLETION DATA		Det Johns of	poor, grv			a					
		Oil Well		ias Well	New Well	Workover	Deepen	Plug Back	K Same Res'v	Diff Res'v	
Designate Type of Comple		ipi. Ready to			Total Depth		<u> </u>	P.B.T.D.		_l	
ue Spudded		the scenth of	o riou.		1000 20121			F.D.T.D.			
evations (DF, RKB, RT, GR, etc.)	Name of	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
erforations					1		······	Denth Ca	Depth Casing Shoe		
		TUBING	, CASI	NG AND	CEMENTI	NG RECO	RD				
HOLE SIZE	C	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
										<u> </u>	
<u></u>				· · · · · · · · · · · · · · · · · · ·			<u></u>				
								1			
. TEST DATA AND REALL (Test must be	QUEST FOR after recovery of						11	L'a da-dh an	L		
ate First New Oil Run To Tank	Date of	and the second	0 1004	ou and mus		ethod (Flow, )			de jor juli 24 m	<b>der 3. j</b>	
ength of Test	Tubing 1	Tubing Pressure				Casing Pressure			Choke Size		
ctual Prod. During Test	Oil - Bb	Oil - Bbls.				Water - Bbla.			Gas- MCF		
GAS WELL											
vouai prod. 1080 - MCP/D	Length	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate		
esting Method (pitot, back pr.)	Tubing	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
L OPERATOR CERT	IFICATE C	<b>OF COM</b>	PLIA	NCE		0					
I hereby certify that the rules ar Division have been complied w	d regulations of t ith and that the is	he Oil Cons	ervation			OIL CO	NSER	VATIO	N DIVIS	ION	
is true and complete to the best	of my knowledge	and belief.	- Veni aldu) (						•.		
		( )			Dat	e Approv	/ed				
Signature	MA		<u> </u>		<b>D</b> .,						
ROBERT L. WILLIAMS	5. JR.	SUPER	UNIT	NDENT	<sup>by</sup> -		• <u>•</u> ••••••••••••••••••••••••••••••••••	· · · · · · · · · · · · · · · · · · ·			
Printed Name 1/1/92			Title								
1/1/92 Date			- <u>393-</u> 2 elephone								

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.

Form C-101 Revised 1-1-89