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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 82240

State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II P.O. Drawer DD, Arasia, NM \$2210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| Operator | | UTRAN | SPUH | 1 OIL | AND NA | TURAL G | | | | | |
|---|--|----------------|---------------------------------|---------------------|--|-----------------|---|------------------------------------|-----------------|---------------------------------------|--|
| Amerada Hess Corporati | ion | | | | | | Well API No. | | | | |
| Address | | | | 30-025 | 30-025-05906 | | | | | | |
| Drawer D, Monument, Ne | w Mexic | o 8826 | 55 | | | | | | | | |
| Reason(s) for Filing (Check proper box) | | | | | Othe | t (Please expl | ain) | | | | |
| New Well | | Change in Ti | | of: | | • | • | | | | |
| Recompletion | Oil . | | ry Gas | Ц | | E | FFECTIVE | 11-01- | 93 | | |
| Change in Operator | Casinghood | Geo [C | cadea mie | <u> </u> | | | | | | | |
| and address of previous operator | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| IL DESCRIPTION OF WELL | | | | | | | | | | | |
| Lease Name Bik. 2 | | | | | _ | | | od of Lease No. | | ease No. | |
| North Monument G/SA Unit 16 Eunice Mo | | | | | nument G | State, | , Federal or Fee | | | | |
| n | 661 | 1 | | | | | | | | | |
| Unit Letter | :660 | F | ed From | Lpe $\frac{70}{20}$ | uth Line | and | <u> 560 </u> | et From The | East | Line | |
| Section 5 Township | 205 | D | Lange 37 | 7 F | | CT0 4 | | | | | |
| | | ·········· | J/ | <u> </u> | , NN | тм, | L | ea | | County | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR | | | | | | RAL GAS | | | | | |
| Name of Authorized Transporter of Oil or Condensate | | | | | Address (Give address to which approved copy of this form is to be sent) | | | | | | |
| EOIT Oil Pipeline Co. | | | | | P.O. Bo | x 4666, | Houston | Texas 77210-4666 | | | |
| Warren Petroleum Compan | of Authorized Transporter of Casinghead Gas Or Dry G | | | | Address (Give | address so wi | hich approved | d copy of this form is to be sent) | | | |
| Warren Petro Teum Compat | | Sec. T | | | P.O. Bo | x 1589, | Tulsa, (| | 2 | | |
| give location of tanks. | D D | | ₩ p. 20S 3 | | Is gas actually | connected? | When | 7 | | | |
| f this production is commingled with that f | rom any other | r lesse or por | ol eive o | enemine! | ing order sumb | | | | | | |
| V. COMPLETION DATA | • | | , | ~~~~ <u>~~~~</u> | ING OLOGI BEDIE | -a: | | | | | |
| Desired Toward Co. 11 | | Oil Well | Ges ' | Well | New Well | Workover | Deepea | Phys Back | Same Res'v | Diff Res'y | |
| Designate Type of Completion | | <u> </u> | _i | | i i | | | i rug beck | | PAIL KESY | |
| Date Spudded | Date Compi | . Ready to Pr | rod. | | Total Depth | | -1 | P.B.T.D. | <u></u> . | | |
| Elevations (DF, RKB, RT, GR, etc.) | | | | | | _ . | | | | | |
| Elevations (DF, RKB, RT, GR, stc.) Name of Producing Formation | | | | | Top Oil/Gas Pay | | | Tubing Depth | | | |
| Perforations | | | | | | | | | | | |
| | | | | | | | | Depth Casis | & 2pos | | |
| TUBING, CASING AND | | | | | CEMENTIN | C PECOP | D | <u> </u> | | | |
| HOLE SIZE | HOLE SIZE CASING & TUBING SIZE | | | | DEPTH SET | | | SACKS CEMENT | | | |
| | | | | SHORS CEMENT | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| V. TEST DATA AND REQUES | T FOR A | LOWAR | 1 6 | | <u> </u> | | | | | | |
| OIL WELL (Test must be after re | COMPOSITION | d wdoma af | ille Inner eil ei | | | | | | | | |
| OIL WELL (Test must be after re Date First New Oil Run To Tank | Date of Test | a roune of | ioda ou ai | na musi | Producing Me | exceed top allo | omable for this | depth or be | for full 24 hou | <u>'2)</u> | |
| | | | | | i rocciona inc | and triow, pe | अप्पः, हृद्यः ।द्वाः, ह | <i>(</i> e.) | | | |
| Length of Test | Tubing Pressure | | | | Casing Pressu | | Choke Size | | | | |
| Actual Prod. During Test | | | | | | | 1 | | | | |
| Actual Prod. Daving Test Oil - Bbls. | | | | | Water - Bbla | | Gas- MCF | | | | |
| OAD STORES | | | | | L | | | | | | |
| GAS WELL Actual Prod. Test - MCF/D | | | | | | | | | - | | |
| Armst Licer Less - Mic'LiD | Length of Te | ength of Test | | | | BLEMMCF | | Gravity of Condensate | | | |
| osting Method (pitot, back pr.) | Tubing Pressure (Shut-in) | | | | A | | | | | | |
| | | | | | Casing Pressu | | Choke Size | | | | |
| VI. OPERATOR CERTIFICA | TE OF | COLOR | I A DICTE | | | | | <u> </u> | | | |
| I hereby certify that the rules and regular | lone of the O | il Consomer | t | 3 | ر ا | III CON | ISEDV | ATION | טואוטוס | | |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above | | | | | OIL CONSERVATION DIVISION | | | | | | |
| is true and complete to the best of my knowledge and belief. | | | | | Date Approved DEC 01 1993 | | | | | | |
| (1) U(1) (. 1/ 1) | | | | | Date | Approve | a DE | <i>,</i> 0 1 13 | 33 | | |
| Simple | | | | | n. | | | | | | |
| R.L. Wheeler Jr. Supv. Admin. Svc. | | | | | By SECTION | | | | | | |
| Printed Name | | | | | | id. | STRICTIS | UPERVISO | R | | |
| 11-22-93 505-393-2144 | | | | | Title_ | | | | | | |
| | | Telepho | es No. | | | | | | | | |
| INCIDICATIONS TO | | | | | | | | | 45 | | |

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.