

District II  
 Drawer DD, Artesia, NM 88210

**OIL CONSERVATION DIVISION**

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

District III  
 0 Rio Brazos Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
 TO TRANSPORT OIL AND NATURAL GAS**

Operator <b>AMERADA HESS CORPORATION</b>	Well API No. <b>30-025-31508</b>
Address <b>DRAWER D, MONUMENT, NEW MEXICO 88265</b>	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Completion <input type="checkbox"/> Change in Operator	<input type="checkbox"/> Other (Please explain) <b>FLOW LINE LAID FR. WELL TO          NMGSAU BTRY. NO. 7.</b>
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
Name of operator give name and address of previous operator	

**DESCRIPTION OF WELL AND LEASE**

Well Name <b>BLK. 2 NORTH MONUMENT G/SA UNIT</b>	Well No. <b>25</b>	Pool Name, Including Formation <b>EUNICE MONUMENT G/SA</b>	Kind of Lease State, Federal or Fee	Lease No. <b>B-1382-5</b>
Location Unit Letter <b>I</b> : <b>1330</b> Feet From The <b>SOUTH</b> Line and <b>1300</b> Feet From The <b>EAST</b> Line Section <b>18</b> Township <b>19S</b> Range <b><del>32E</del> 37</b> , NMPM, <b>LEA</b> County				

**DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <b>TEXAS NEW MEXICO PIPELINE CORPORATION</b>	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <b>1670 BROADWAY, DENVER, COLORADO 80202</b>
Name of Authorized Transporter of Casinghead Gas <b>WARREN PETROLEUM COMPANY</b>	or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. BOX 1589, TULSA, OKLAHOMA 74102</b>
Well produces oil or liquids, location of tanks.	Unit <b>18</b>	Sec. <b>19S</b>
	Twp. <b>19S</b>	Rge. <b>37E</b>
Is gas actually connected?		When?
<b>YES</b>		<b>11-25-92</b>

If production is commingled with that from any other lease or pool, give commingling order number.

**COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Spudded <b>07-09-92</b>	Date Compl. Ready to Prod. <b>11-25-92</b>	Total Depth <b>4,400'</b>	P.B.T.D. <b>3,935'</b>					
Producing Formations (DF, RKB, RT, GR, etc.) <b>3697.6' GR</b>	Name of Producing Formation <b>GRAYBURG SAN ANDRES</b>	Top Oil/Gas Pay <b>3,830'</b>	Tubing Depth <b>3,897'</b>					
Casing Depth <b>3830' - 3932'</b>		Depth Casing Shoe						

**TUBING, CASING AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	1,355'	1111 SKS. CLASS "C"
12-1/4"	9-5/8"	3,679'	870 SKS. CLASS "C"
8-3/4"	7" LINER	3,507'-4,400'	236 SKS. 50:50 "C"
	2-7/8"	3,897'	

**TEST DATA AND REQUEST FOR ALLOWABLE WELL**

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

First New Oil Run To Tank <b>11-25-92</b>	Date of Test <b>11-27-92</b>	Producing Method (Flow, pump, gas lift, etc.) <b>PUMPING</b>	
Length of Test <b>24 Hrs.</b>	Tubing Pressure	Casing Pressure	Choke Size
Oil Prod. During Test	Oil - Bbls. <b>140</b>	Water - Bbls. <b>14</b>	Gas - MCF <b>150</b>

**TEST WELL**

Oil Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Test Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

**OPERATOR CERTIFICATE OF COMPLIANCE**

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

*R. L. Wheeler, Jr.*  
 Signature  
**R. L. WHEELER, JR.** SUPR. ADM. SVC.  
 Date  
**11-30-92**  
 Title  
**(505) 393-2144**  
 Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved **NOV 30 '92**  
 By **ORIGINAL SIGNED BY JERRY SEXTON**  
**DISTRICT I SUPERVISOR**  
 Title

- INSTRUCTIONS:** This form is to be filed in compliance with Rule 1104
- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
  - All sections of this form must be filled out for allowable on new and recompleted wells.
  - Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
  - Separate Form C-104 must be filed for each pool in multiply completed wells.