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State of New Mexico F- ty, Minerals and Natural Resources Departmy

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OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe. New Mexico 87504-2088

RICT M Rio Brisco Rd., Asioc, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION Ŧ. TO TRANSPORT OIL AND NATURAL GAS Operato Well API No. Amerada Hess Corporation 30-025-31586 Addres Drawer D, Monument, New Mexico 88265 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Dry Cas EFFECTIVE 11-01-93 Change in Operator Casinghead Gas Condensate If change of operator give same and address or previous operator II. DESCRIPTION OF WELL AND LEASE Lease Name B1k. 9 Well No. Pool Name, Including Formation Kind of Lease Lease No. North Monument <u>G/SA</u> Unit 19 Eunice Monument G/SA State, Federal or Fee 8-1961-2 Location 1295 Feet From The North Line and 2560 Feet From The West Section 25 Township 195 Range 36E , NMPM. County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil CYFOTTO Condenses. EXECTT Energy Pipeline LP Address (Give address to which approved copy of this form is to be sent) EOTT Oil Pipeline Co. P.O. Box 4666, Houston, Texas 77210-4666 Effective 4-1-94 Name of Authorized Transporter of Casinghead Gas Address (Give address to which approved copy of this form is to be sent) Warren Petroleum Company P.O. Box 1589, Tulsa, OK 74102 If well produces oil or liquids, give location of tanks. Unit Twp Rge. is gas actually connected? When ? 25 | 195 I <u>36</u>E YES 2-25-93 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Cas Well New Well Workover Deepen Plug Back Same Res'v Designate Type of Completion - (X) Date Spudded Date Compt. Ready to Prod. Total Depth PRID Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Cas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE OIL 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.) Date Firm New Oil Rug To Tank Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Press :re Casing Pressure Choke Size Actual Prod. During Test Oil - BMe Water - Bbls. Gas- MCF **GAS WELL** Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate esting Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete to the best of my knowledge and bellef. Date Approved DEC 0 1 1993 Signature ORIGINAL SIGNED BY JERRY SEXTON R.L Wheeler Admin. Svc. DISTRICT I SUPERVISOR Printed Name

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Dete

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

Title_

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

Title 505-393-2144

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.