HT OF COPIES BEC	TIVEO	1	
DISTRIBUTE	Эн		
SANTAFE			
FILE			
u.s.c.s.		1	
LAND OFFICE			
TRANSPORTER	OIL		
·	GAS		
OPERATOR			
PROBATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMENSION

	SANTATE	REQUEST	FOR ALLOWABLE	Form C+104 Supersedes Old C+104 and C+1
	FILE U,5.6,5,	- AUTUONIZATION 70 70	AND	Effective 1-1-65
	LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	. GAS
	TRANSPORTER OIL			
	GAS			
	OPERATOR			
Į.	PRORATION OFFICE			-
	Ops. dec.	A		
	Address	Amerada Hess Corporatio	on	
		P.O. Box 591 Midland	L. Texas 79701	
	Reason(s) for filing (Check proper box	1)	Other (Please expitain)	CHANGE NAME FROM
	New Well	Change in Transporter of:		AMERADA DIV. AMERADA HESS CORPORATION
	Recompletion Change in Ox criship	Oil Dry G Casinghead Gas Conde		AMERADA HESS CORPORATION
		Casinghead Gas Conde	insate []	EFFECTIVE AUG. 1, 1971
	If change of ownership give name and address of previous owner			
Ħ.	DESCRIPTION OF WELL AND			
		Well No. Pool Name, Including F	} · · · · · · · · · · · · · · · · · · ·	Lease No.
	State ()		bb State, Fede	State A1469
	Unit Letter J ; 19	80 Feet From The South Li	na mad 2310	73 . 4
	, <u> </u>	OO Feet From The BOTTLIFE LIN	he and ZJIV Feet From	The <u>East</u>
	Line of Section 16 To	waship 20-S Range 3	7-E , NMFM, I.ea	County
	Discourse and the second			
111.	DESIGNATION OF TRANSPOR		Address (Give address to which appr	and carry of this form is to be sent
	1			•
	Shell Pipe Line Compar Name of Authorized Transporter of Cas	singhead Gas 🔀 or Dry Gas	Box 2099 - Hous Con. Address (Give address 10 which appr	oved copy of this form is to be sent)
	Warren Petroleum Corpo		1	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	1	hen
	give location of tanks.	16 20-5 37 - E		Unknown
EV.	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	1
	Designate Type of Completic	Otl Well Gas Well	New Well Workover Deepsen	Plug Back Same Resty. Diff. Resty.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!I/Gas Pay	Tubing Depth
	, , , , , , , , , , , , , , , , , , , ,			Toring Beptil
	Perforations		-	Depth Casing Shoe
	UOL 5 6175		CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
!			<u>i </u>	
V.	TEST DATA AND REQUEST FOOIL WELL	OR ALLOWABLE (Test must be a pole for this de	fter recovery of total volume of linad of pth or be for full 24 hours)	l and must be equal to or exceed top allow-
i	Date First New Oil Run To Tonks	Date of Test	Producing Method (Flow, pumpi, gas l	ifi, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod, During Test	Oil-Bbla.	Water - Bbls.	Gas - MCF
	Actual Press, During 1981	On Data.	Water - DDIS.	GGE-MCF
•			And the second s	
	GAS WELL			
	Actual Frod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
}	Testing Method (pitol, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Sire
	and the same of same to be a beautiful to the same to be a same of the same to be a	The state of the s		,
71.	CERTIFICATE OF COMPLIANC	CE CE	OIL CONSERVA	ATION COMMISSION
	THE PERSON OF WORK MODELS			1 8 1971
	hereby certify that the rules and re		APPROVED A	15 15/1
	Commission have been complied washove is true and complete to the		BY John W.	Lunyan
	\sim			GeoRaist
	A.7/(a) .)	TITLE	
	1/1 11 Y A	/	I This form is to be filled in	compliance with with a 1104

This form is to be filed in compliance with RULE 1104.

If this is a regard for ellowable for a nawly drilled or despend well, this form must be recompensed by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on the recompleted of the

RECEIVED

AUG 111971
OIL CONSERVATION COMM.
HOBBS, N. M.







Job separation sheet

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DISTRIBUTION		
		Supersedes Old C-102 and C-103
	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
SANTA FE	- 1	
FILE	U.C. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	5a. Indicate Type of Lease
U.S.G.S.		State X Fee.
LAND OFFICE		5. State Oil & Gas Lease No.
OPERATOR		B-1469
	THE PERSON OF TH	THINITINI THE
(DO NOT USE THIS FORM	SUNDRY NOTICES AND REPORTS ON WELLS M FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. PAPPLICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	
USE **	APPLICATION FOR PERMIT - ** (FORM C-101) FOR SUCH PROPOSALS.)	7. Unit Agreement Name
l. OIL GAS		
WELL WELL	OTHER*	8. Farm or Lease Name
2. Name of Operator		State "Q"
Amerada Petroleu	m Corporation	g. Well No.
3. Address of Operator		
P. O. Box 668 -	Hobbs, New Mexico 88240	1
4. Location of Well		10. Field and Pool, or Wildcat
T	1980 FEET FROM THE South LINE AND 2310 FEET	Grayburg - San Andres
UNIT LETTER	TEET FROM THE	
Bast	NE, SECTION 16 TOWNSHIP 20-8 RANGE 37-B	IMPM.
THELII	NE, SECTION TOWNSHIP HANGE	
mmmm	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3545' DF	Lea
711111111111111111111111111111111111111		Od - Dod
	Check Appropriate Box To Indicate Nature of Notice, Report of	r Other Data
NOTIC	E OF INTENTION TO: SUBSEQU	JENT REPORT OF:
		, —
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	J
	OTHER T. A. Tubb	Zone
OTUE D		
OTHER		
17. Describe Proposed or Con	npleted Operations (Clearly state all pertinent details, and give pertinent dates, inc	luding estimated date of starting any proposed
plug in Medel D 15% NE acid. R	duction equipment from Grayburg and Tubb Zones. 8 Pkr. at 6420'. Acidised Grayburg Perfs. 3750' to an production equipment for Grayburg Zone and resu	31/0. ATCU DOG BETE'
single complete	s changed from dual oil - oil well in Grayburg Zon d pumping oil well in Grayburg Zone. Tubb Zone T.	# C IMBD FADE CO #
single complete	a changed from dual oil - oil well in Grayburg Zone depumping oil well in Grayburg Zone. Tubb Zone T. Information above is true and complete to the best of my knowledge and belief. TITLE District Superintende	A. 11-22-68.
18. I hereby certify that the i	information above is true and complete to the best of my knowledge and belief.	A. 11-22-68.