Submit 3 Copies	
Appropriate Dating Office	
DISTRICT	
PO Box 1980 Hobbe NOM	112.40

DISTRICT D P.O. DEFEND DD, Areas, NM \$5210

DISTRICT III IUU RIO BIRIZON R.C., AZIAC, NM. 17410

----Finergy, Minerals and Natural Resources Deprint

OIL CONSERVATION DIVISION P.O. Box 2088

Sania Fe, New Mexico 87504-2088

1.1.4

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Ι.		TOTRA	NSI	PORT OIL	AND NAT	URAL G	AS				
Орегацог								PI No			
Amerada Hess Corporati	on										
Address Drawer D, Monument, Ne	w Meri	CO 8826	55								
Reason(s) for Fulng (Check proper box)					Othe	T (Plante anni					
New Well	Change in Transporter of: Amerada Hess Corporation physically took										
	Oi Dry Gu Over operation on 1-8-90.										
Change is Operator	Campbe	nd Gas 🗌	Conc	iersale		us: Flo					
If change of operator give name and address of previous operator John	H. He	ndrix (lorp	oration	. 223 Wes					70701	
			<u>, , , , , , , , , , , , , , , , , , , </u>		<u>, 225 MC3</u>	c waii,	Suice J	23, <u>M101</u>	and, I	x, 79701	
II. DESCRIPTION OF WELL	AND LE		Brid	Name Jack 4							
Wood "A" State						1	of Lease Federal or Fee		Lesse No. B-2406		
Location		1	1						<u> </u>		
Unit LetterF	1	980	Feet	From The	North Line	16	50 .	et From The	West	• •	
		0.0					n	et riom ine _		Line	
Section 16 Townshi	<u>p2</u>	05	Rang	7	37E , NN	APM,		Lea		County	
III. DESIGNATION OF TRAN	SPORT			ND NATU							
Name of Authonized Transporter of Oil	\Box	or Condez	sale					copy of this fo		rens)	
Shell Pipeline Corpora	P. O. Box 1910, Midland, Texas 79701										
Name of Authonized Transporter of Casing			or D	ny Gus []]	Address (Give	e address so w	hich approved	copy of this fo	orm is to be :		
Warren Petroleum Compa If well produces oil or liquids,	ny Unut	Sec	Twp	- Ros		P. O. Box 1589, Tulsa, Oklahoma ls gas actually connected? When ?				2	
give location of tanks.		1	1	. Kgc. 	Yes	connected?	When	ŗ			
If this production is commingled with that	from any of	her lease or	pool,	give comming!			1				
IV. COMPLETION DATA		<u> </u>							·····		
Designate Type of Completion	$\cdot \infty$	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		N Reply to) Dervel		Total Depth		<u> </u>	l	I	1	
Date Spinoed	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Deel				
]							ruong bep	Tubing Depth		
Perforations					·			Depth Casin	g Shoe		
·											
					CEMENTE	NG RECOR	3D	_			
HOLE SIZE	CA	CASING & TUBING SIZE DEPTH SET					SACKS CEMENT				
	÷					·····					
	1							: 			
								· · · · · · · · · · · · · · · · · · ·			
V. TEST DATA AND REQUES					*			- -			
OIL WELL (Test must be after r	ecovery of s	otal volume	of loa	d oil and must	be equal so or	exceed top all	omable for thi	s depih or be j	for full 24 ho	wrs.)	
Date First New Oil Run To Tank	Date of Te	2			Producing Me	thod (Flow, pl	ump, gas líft, e	nc.)			
Length of Test	Tubing Pr	Tubing Pressure			Casing Pressu			Choke Size			
Lenger of For	Turning Freesance		Casing Pressure								
Actual Prod. During Test	Oil - Bbis.			Water - Bbls.			Gas- MCF				
GAS WELL					*			- +	· · · · ·		
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Condens	sale MMCF		Gravity of C	ondensate		
Testing Method (puot, back pr.)	Tubing Pr	essure (Shut	-m)		Casing Pressu	re (Shut-in)		Choke Size			
					۱ <u>٫ </u>		·				
VI. OPERATOR CERTIFIC.								ATION		~ NI	
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 try knowledge and belief.					190						
\sim	n n				Date	Approve	d	Urin	1010		
J.adil	$\underline{\nu}$				_	(iptes)	NAL CICLAR	D BY JERR	V 55.V794	3	
Signature	,				By			i strank. I stranki		n 	
S. W. Small	Distric	<u>et Supe</u>	rint Title	<u>tenden</u> t							
	505 393	3-2144	1140		Title_						
Date			phone	No.							
					11						

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 with Rule 111.

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.

RECEIVED

JAN 12 1990

oss Rozes cares