

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

I. Operator
Amerada Hess Corporation
Address
P. O. Drawer D, Monument, New Mexico 88265
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Request 1000 bbl. testing allowable.
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Joyce Praitt	Well No. 3	Pool Name, including Formation Fannie Drinkard	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter P ; 810 Feet From The South Line and 860 Feet From The East Line of Section 31 Township 21S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Western Oil Transportation	Address (Give address to which approved copy of this form is to be sent) P.O.Box 1183, Houston, Texas 77001			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Co.	Address (Give address to which approved copy of this form is to be sent) Box 1351, Midland, Texas 79701			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.

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

IV. 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.
Date Spudded 10-6-76	Date Compl. Ready to Prod. 11-24-76		Total Depth 6750'		P.B.T.D. 6717'			
Elevations (DF, RKB, RT, GR, etc.) GR 3459.7'	Name of Producing Formation Drinkard		Top Oil/Gas Pay 6562'		Tubing Depth 6502'			
Perforations Selectively perf. fr. 6562' to 6677'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8" 24#		1193'		800 sks.			
7-7/8"	5-1/2" 14# & 15.5#		6750'		2100 sks.			

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 First New Oil Run To Tanks 11-24-76	Date of Test 11-24-76	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 4 hrs.	Tubing Pressure 150#	Casing Pressure Pkr.	Choke Size 3/4"
Actual Prod. During Test	Oil - Bbls. 60	Water - Bbls. 10	Gas - MCF

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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

SUPVR., ADM. SERV.,

(Signature)

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY Jerry S. Suter

TITLE _____

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

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied 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 new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply

RECEIVED

NOV 23 1976

OIL CONSERVATION COMM.
HOBBS, N. M.