

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-1-79REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

CORRECTED COPY

Operator Amerada Hess Corporation	
Address 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)	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name B. M. Marcus	Well No. 2	Pool Name, including Formation Warren Tubb	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter <u>C</u> : <u>990</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u>					
Line of Section <u>20</u> Township <u>20-S</u> Range <u>38-E</u> , NMPM, Lea County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Warren Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma 74101					
If well produces oil or liquids, give location of tanks.	Unit <u>C</u>	Sec. <u>20</u>	Twp. <u>20S</u>	Rge. <u>38E</u>	Is gas actually connected? No	When

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 ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Res'v. ☐	Diff. Res'v. ☐
Date Spudded 10-12-82	Date Compl. Ready to Prod. 3-11-83	Total Depth 7650'		P.B.T.D. 6976'					
Elevations (DF, RAB, RT, GR, etc.) 3547' GR 3560' DF	Name of Producing Formation Tubb		Top Oil/Gas Pay 6493'		Tubing Depth 7650'				
Perforations <u>6915-6919 6493-6660</u>					Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8"		377'		400 sks.				
12-1/4"	9-5/8"		4495'		1925 sks.				
8-3/4"	7"		7650'		600 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)

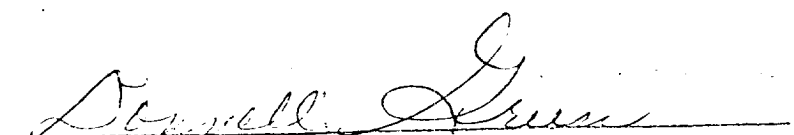
Date First New Oil Run To Tanks 2-21-83	Date of Test 2-23-83	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24	Tubing Pressure 350	Casing Pressure pkr.	Choke Size 15/64"
Actual Prod. During Test	Oil-Bbls. 216	Water-Bbls. 6	Gas-MCF 123 MCFPD

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (spot, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Production Clerk
(Title)
3-15-83
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 18 1983
ORIGINAL SIGNED BY EDDIE SEAYBY
TITLE OIL & GAS INSPECTOR

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 multiple completed wells.

RECEIVED

MAR 17 1983

O.C.D.
HOBBS OFFICE