NEW MEXICO OIL CONSERVATION COMMISSION

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator	Lease	Well No.
Amerada Hess Corporation	State P "A"	1

Location of Well	Unit	Sec	Twp	Rge	County
	K	18	22 S	37E	Lea

	Name of Reservoir or Pool	Type of Prod (Oil or Gas)	Method of Prod Flow, Art Lift	Prod. Medium (Tbg or Csg)	Choke Size
Upper Compl	Arrowhead	Oil	Pump	Tbg.	2"
Lower Compl	Eumont	Gas	Flow	Csg.	2"

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9-11-78

	Upper Completion	Lower Completion
Well opened at (hour, date): 9-12-78		
Indicate by (X) the zone producing	X	
Pressure at beginning of test	20	180
Stabilized? (Yes or No)	Yes	No
Maximum pressure during test	30	220
Minimum pressure during test	10	180
Pressure at conclusion of test	30	220
Pressure change during test (Maximum minus Minimum)	20	40
Gas pressure change an increase or a decrease?	Inc.	Inc.

Well closed at (hour, date): 9-13-78 Total Time On Production 24 hrs.

Oil Production During Test: 8 bbls; Grav. ----- ; Gas Production During Test TSTM MCF; GOR ------

Remarks

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): 9-14-78		
Indicate by (X) the zone producing		X
Pressure at beginning of test	10	220
Stabilized? (Yes or No)	Yes	Yes
Maximum pressure during test	10	40
Minimum pressure during test	10	20
Pressure at conclusion of test	10	20
Pressure change during test (Maximum minus Minimum)	---	20
Gas pressure change an increase or a decrease?	---	Dec.

Well closed at (hour, date) 9-15-78 Total time on Production 24 hrs.

Oil Production During Test: 0 bbls; Grav. ------ ; Gas Production During Test 140 MCF; GOR

Remarks

I hereby certify that the information herein contained is true and complete to the best of my knowledge.

Approved SEP 20 1978, 19

New Mexico Oil Conservation Commission

Order Signed by Jerry Sexton Dist. I Supv.

Operator AMERADA HESS CORPORATION

By David Hayes

Title Production Technician

Date 9-18-78

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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
Effective 1-1-65

I. Operator: Amerada Hess Corporation

Address: Box 591, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

Other (Please explain): CHANGE NAME FROM AMERADA DIV. AMERADA HESS CORPORATION TO: AMERADA HESS CORPORATION EFFECTIVE AUG. 1, 1971

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
State P "A"	1	Eumont Queen Gas	State, Federal or Fee State	

Location

Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West

Line of Section 18 Township 22S Range 37E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
None	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Northern Natural Gas Co.	2223 Dodge Street, Omaha, Neb. 68101

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					Yes	

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 Resv.	Diff. Res

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas 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

(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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

R. W. Dennis
(Signature)
PRODUCTION RECORDS SUPERVISOR
(Title)

OIL CONSERVATION COMMISSION

APPROVED AUG 18 1971, 19__

BY John W. Runyan

TITLE Geologist

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.

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TRANSPORTER GAS		
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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
Effective 1-1-65

I. Operator

Amerada Hess Corporation

Address

P. O. Box 591, Midland, Texas 79701

Reason(s) for filing *(Check proper box)*

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐

Other *(Please explain)*: CHANGE NAME FROM AMERADA DIV. AMERADA HESS CORPORATION TO: AMERADA HESS CORPORATION EFFECTIVE AUG. 1, 1971

If change of ownership give name and address of previous owner _____ EFFECTIVE AUG. 1, 1971

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
State P "A"	1	Arrowhead/Grayburg	State	B-934

Location

Unit Letter K ; 1980' Feet From The South Line and 1980' Feet From The West

Line of Section 18 Township 22-S Range 37-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address *(Give address to which approved copy of this form is to be sent)*
Texas-New Mexico Pipeline Company	Box 1510-Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address *(Give address to which approved copy of this form is to be sent)*
Skelly Oil Company	Box 1351-Midland, Texas 79701

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	18	22-S	37-E	Yes	EFFECTIVE JANUARY 31, 1977, ~~SKELLY OIL COMPANY MERGE~~ INTO GETTY OIL COMPANY.

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

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations *(DF, RKB, RT, GR, etc.)*	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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OIL WELL

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Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method *(pitot, 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.

J. H. Driver
(Signature)
PRODUCTION RECORDS SUPERVISOR
(Title)

OIL CONSERVATION COMMISSION

APPROVED AUG 18 1971, 19__

BY _____

TITLE SUPERVISOR DISTRICT I

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