

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

Form O-104
Supersedes OIL O-104 and O-
Effective 1-1-85

DISTRIBUTION	
SALE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator
Amerada Hess Corporation

Address
Drawer D, Monument, New Mexico 88265

Reasons for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)
Effective 5-1-82.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. Wood	Well No. 6	Pool Name, including Formation Brunson Ellenburger	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter A, 713 Feet From The North Line and 713 Feet From The East Line of Section 22 Township 22-S Range 37-E, N.M.P.M., Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil ☒ or Condensate ☐ The Permian Corporation Permian (Eff 9/1/87)	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 ☒ or Dry Gas ☐ Getty Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1351, Midland, Texas 79701
If well produces oil or liquids, give location of tanks. Unit H Sec. 22 Twp. 22-S Rge. 37-E	Is gas actually connected? 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 Casing Repair Other	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevation (ft. A.S.L. RT. GP, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Particulars	Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 greater than allowable for this depth or be for full 24 hours)

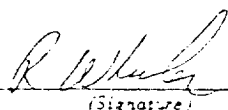
Date of Test	Flow To Tanks	Flow of Test	Producing Method (Flow, pump, gas lift, etc.)
Casing Pressure	Casing Pressure	Casing Pressure	Choke Size
Actual Flow	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Flow Test - MCF	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pvt.)	Testing 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.


(Signature)

Production Clerk

(Title)

April 5, 1982

(Date)

OIL CONSERVATION COMMISSION

APR 5 1982

APPROVED _____, 19

BY _____ Orig. Signed by

Les Clements

TITLE _____ Oil & Gas Insp.

This form is to be filed in compliance with RULE 1101.

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.

RECEIVED
APR 7 1982
FBI - MEMPHIS