NO. UF COPIES REC	ITEO		
DISTRIBUTION			1
SANTA LE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			
Operator			

NEW MEXICO OIL CONSERVATION COMMISSION

	FILE U.S.G.S. LAND OFFICE	REQUEST	FOR ALLOWABLE AND ANSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and €-1, Effective 1-1-65 AS	
1.	TRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator				
	Amerada Hess Corporati	on			
	P. O. Box 591 - Midlan Reason(s) for filing (Check proper box		Other (Please explain)		
	New Well Recompletion Change in Ow .ership	Change in Transporter of: Oil Dry Ga Casinghead Gas Conder	AMEI	CHANGE NAME FROM AMERADA DIV. RADA HESS CORPORATION MERADA HESS CORPORATION MERADA HESS CORPORATION MERECTIVE AUG. 1, 1971	
	If change o, ownership give name and address of previous owner	**************************************			
II.	DESCRIPTION OF WELL AND Lease Name Federal "H"	LEASE Well No. Pool Name, Including Fool Name Pool Name Po	•	20007	
	Location	-		or Fee Fed LC045701	
	Unit Letter H; 198	SO Feet From The N Lin	se and 660 Feet From T	The E	
	Line of Section 18 Too	wnship 23 S Range	37 E , , ммрм, Lea	a County	
III.		SIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS me of Authorized Transporter of Oil [X] or Condensate Address (Give address to which approved copy of this form is to			
	The Permian Corporation		Box 1183 - Houston, Texas 77001		
	Name of Authorized Transporter of Casinghead Gas 🔀 or Dry Gas 🗔 Skelly Oil Company		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. Rge. H 18 23S 37E	Is gas actually connected? Whe	n 12-7-67	
rw.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA				
IV.	Designate Type of Completic	on - (X) Gas Well	New Well Workover De⊕pen	Plug Back Same Resty. Diff. Resty.	
	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 OIL WELL Date First New Oil Run To Tanks Date of Test Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pumgs, gas lift, etc.)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas ii)	i, etc./	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF	
		4	<u> </u>	, , , , , , , , , , , , , , , , , , ,	
	Actual Frod, Teet-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANCE	CE		TION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED AUG 18	. 19	
	Commission have been complied wabove is true and complete to the	vith and that the information given best of my knowledge and belief.	BY John Cv.	Junyan	

PRODUCTION RECORDS SUPERVISOR

(Title)

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

If this is a request from allowable for a newly drilled or deepense well, this form must be accompanied by a tebulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this fform must be filled out completely for siles, which are the completely for siles.

RECEIVED

AUG 111971 OIL CONSERVATION COMM. HOBBS, N. M.