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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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-2
Effective 1-1-65

Operator Amerada Hess Corporation	
Address P. O. Box 591, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change In Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change In Ownership ☐	Casinghead Gas ☐ Condensate ☐
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 Ida Wimberly	Well No. 13	Pool Name, including Formation Justis Blinbry	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter M	330'	Feet From The South	Line and 330'	Feet From The West	
Line of Section 24	Township 25-S	Range 37-E	N.M.P.M.	Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas-New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) Box 1510-Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 1384-El Paso, Texas 79948					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 24	Twp. 25-S	Rge. 37-E	Is gas actually connected? Yes	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't.	Diff. Res't.
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 (Test must be after recovery of total volume of dead oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

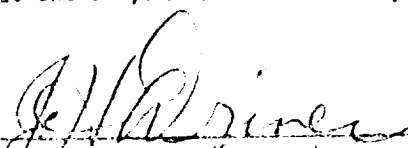
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

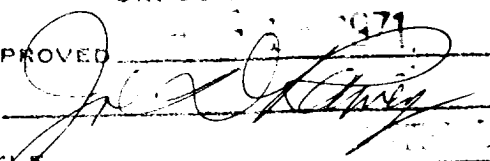
GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	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.


PRODUCTION RECORDS SUPERVISOR
(Title)

OIL CONSERVATION COMMISSION
APPROVED  1971, 19
BY
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 deviated tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allow

NEW MEXICO OIL CONSERVATION COMMISSION
SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

Operator Amerada Hess Corporation			Lease Ida Wimberly			Well No. 13	
Location of Well		Unit N 7	Sec 24	Twp 25	Rge 37	County 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	Langlie Mattix		Gas	Flow	Csg.	2"	
Lower Compl	Justis Blinebry		Oil	Art-Lift	Tbg.	1-1/4"	

FLOW TEST NO. 1

Both zones shut-in at (hour, date): 9:00 A.M., March 22, 1971

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>9:00 A.M., March 23, 1971</u>		
Indicate by (X) the zone producing.....		X
Pressure at beginning of test.....	100	0
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	100	0
Minimum pressure during test.....	100	0
Pressure at conclusion of test.....	100	0
Pressure change during test (Maximum minus Minimum).....	0	0
Was pressure change an increase or a decrease?.....	--	--
Well closed at (hour, date): <u>9:00 A.M., 3-24-71</u>	Total Time On Production <u>24 Hrs.</u>	
Oil Production	Gas Production	
During Test: <u>0</u> bbls; Grav. <u>-</u> ; During Test <u>0</u> MCF; GOR <u>--</u>		
Remarks <u>Well dead.</u>		

FLOW TEST NO. 2

	Upper Completion	Lower Completion
Well opened at (hour, date): <u>9:00 A.M., 3-25-71</u>		
Indicate by (X) the zone producing.....	X	
Pressure at beginning of test.....	100	0
Stabilized? (Yes or No).....	Yes	Yes
Maximum pressure during test.....	100	0
Minimum pressure during test.....	100	0
Pressure at conclusion of test.....	100	0
Pressure change during test (Maximum minus Minimum).....	0	0
Was pressure change an increase or a decrease?.....	--	--
Well closed at (hour, date): <u>9:00 A.M., 3-26-71</u>	Total time on Production <u>24 Hours</u>	
Oil Production	Gas Production	
During Test: <u>0</u> bbls; Grav. <u>--</u> ; During Test <u>248</u> MCF; GOR <u>---</u>		
Remarks _____		

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

Approved APR 23 1971 19
New Mexico Oil Conservation Commission

By _____
Title _____

Operator Amerada Hess Corporation

By [Signature]

Title Area Superintendent

Date April 16, 1971

4 For Flow at the group test shall be stabilized and that the flow

1. Pressure tests shall be filed in triplicate. The first copy of the test results shall be filed with the Division of the New Mexico Oil Conservation Commission. The second copy shall be filed with the Division of the New Mexico Oil Conservation Commission. The third copy shall be filed with the Division of the New Mexico Oil Conservation Commission. The pressure recording gauge charts with all the data thereon shall be taken and filed thereon in lieu of the test results. The operator may construct a pressure versus time chart indicating thereon all pressure recorded by the gauge charts as well as all deadweight tests taken. If the pressure curve is submitted to the Commission, it must be permanently filed in the operator's file. Also accompany the Pressure Leakage Test Form with a gas-oil ratio test period.

[illegible]