Submic Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico y, Minerals and Natural Resources Departme

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## **OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

REQUEST FOR ALLOWABLE AND AUTHORIZATION TOTRANSPORT OIL AND NATURAL GAS  Be twell 0.11 & Gas Company Address  Be twell 0.11 & Gas Company  Company by Address  Company  Compan	1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWA	ARI E AND ALITHODIZA	TION
Section   1   1   1   1   1   1   1   1   1	I.			
Responded for Filter (Check proper local)  Responded for Filter (Check proper local)  Recompletion  Change in Operator X  Condingband Gas  On Dry Gas  Condingband Gas  On Dry Gas  Condingband Gas  Condingband Gas  On Dry Gas  Condingband Gas  Recompletion  Change in Operator X  Condingband Gas  Condingband Gas  Condingband Gas  Recompletion  II. DESCRIPTION OF WELL AND LEASE.  Lease No.  Lease	Operator			
P. O. Box 2577   Hialeah, Florida 33012	Betwell Oil & (	las Company	-	
Change in Operator	P. O. Box 2577  Reason(s) for Filing (Check proper box)			
Figure   Programme   Americal Americal Hess Corp.   P. O. Box 591   Midland, Tx. 79701	•	<del></del>		
Affice and a service of previous operators Affice Pada a Hess Corp. P. U. BOX 591 Mid and, Tx. 79701  H. DESCRIPTION OF WELL AND LEASE  Lease Name Langlie Mattix Netto No. 1 Service And 1 Service An	If change of operator give name			
Lease No.   Man   1   Mattix   Mell No.   Book Nime. Including Formation   National Control   National Con	and address of previous operator	Amerada Hess Corp.	P. O. Box 591	Midland, Tx. 79701
Location				
Section   27   Township   24 S   Range   37 F   NMPM   E   County	Woolworth Unit			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil	Unit LetterC	_ : 7 5 Feet From The _	North Line and 2540	Feet From TheEastLine
Name of Authorized Transporter of Oil  In ject Lin   Well    Name of Authorized Transporter of Casinghead Gas	Section 27 Townshi	p 245 Range	37E , NMPM,	Lea County
Name of Authorized Transporter of Oil  In ject Lin   Well   New York Casinghead Gas   or Dry Gas   Address (Give address to which approved copy of this form is to be seen)  If well produces oil or liquids, pure location of tanks.  If this production is commitagled with that from any other lease or pool, give containingling order number:  IV. COMPLETION DATA  Designate Type of Completion - (X)  Date Compl. Ready to Prod.  Date Speadded   Date Compl. Ready to Prod.  Date Speadded   Date Compl. Ready to Prod.  Total Depth   P.B.T.D.  Elevations (IPF, RRS, RT, GR, etc.)   Name of Producing Formation   Top Oil/Gas Pay   Tubing Depth  Performance   The Producing Formation   Top Oil/Gas Pay   Tubing Depth Casing Shoo  TUBING, CASING AND CEMENTING RECORD    HOLE Size   GASING & TUBING Size   DEPTH SET   SACKS CEMENT    V. TEST DATA AND REQUEST FOR ALLOWABLE   OIL Well   Gas well to or exceed top allowable for this depth or be for full 28 howrs.)  Producing Method (Firm, pump, gai 16), etc.)  Length of Test   Tubing Pressure   Casing Pressure   Choke Size    Actual Prod. During Test   Oil - Bbit.   Water - Bbits   Gase MCF    GAS WELL   Actual Prod. Test   MCF/D   Length of Test   Bbits. Condensate/MicCF   Gravity of Condensate    VI. OPERATOR CERTIFICATE OF COMPLIANCE   Investigation   Tubing Pressure (Shut-in)   Casing Pressure (Shut-in)   Date Pressure (	III. DESIGNATION OF TRAN	ISPORTER OF OIL AND NATU	JRAL GAS	
If well produces oil or liquids, promises of a continuity of this form is to be sent)	Name of Authorized Transporter of Oil			approved copy of this form is to be sent)
If well produces oil or liquids, give location of lanks.  If this production is commingled with that from any other lease or pool, give commingling order number:  If W. COMPLETION DATA  Designate Type of Completion - (X)  Date Spadded  Date Compl. Ready to frod.  Date Oppil. Ready to frod.  Date Spadded  Date Completion - (X)  Date Spadded  Date Completion - (X)  Name of Producing Formation  Top Oil/Gax Pay  Tobing Depth  Tobing Depth  Tobing Depth  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 load 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 Tank  Date of Test  Producing Method (Flow, pump, gas life, etc.)  Length of Test  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil - Bbis.  Water - Bbis.  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Onoke Size  VI. OPERATOR CERTIFIC ATE OF COMPLIANCE  Distributed be to do not know been compiled with and that the information given above is time and complete to the best of my knowledge and belief.  Tubing Press and the information given above is time and complete to the best of my knowledge and belief.  Vice President  Tubing Island  Vice President  Title  Top Oil/Gax Pay  Tobing Depth  Tobing Depth  Tobing Pressure  Casing Pressure (Shut-in)  Onoke Size  OIL CONSERVATION DIVISION  Date Approved  By  Transport Title  Date Approved  Date Approved  Date Approved  Date Approved  Date Approved	Injection well	chood Coo		
TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  Date First New Oil Run To Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  Oil - Bbls.  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  Oil - Condensate (Shui-in)  Casing Pressure  Condensate (Shui-in)  Choke Size  Oil Conservation  Date Ompiled with that the information given above is true and compilete to the best of my knowledge and betief.  Date Approved  By  Casing Proved  Date Pressure  Oil Conservation  Oil - Conservation  Oil - Conservation  Oil - Conservation  Date Compiled with that the information given above is true and compilete to the best of my knowledge and betief.  Discovered to the selection of the condensate of the condensat	Traine of Addiolized Transporter of Casin	gnead Gas or Dry Gas	Address (Give address to which	approved copy of this form is to be sent)
Designate Type of Completion - (X)  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Spudded  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Total Depth  P.B.T.D.  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  (Itest 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 Tank  Date of Tex  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  Gravity of Condensate  Will OPERATOR CERTIFICATE OF COMPLIANCE  Ihereby certify that the niles 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  Lowell S, Dunn II Vice President  Trile  Trile		Unit Sec. Twp. Rge	. Is gas actually connected?	When ?
Designate Type of Completion - (X)  Date Spadded  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 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 Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I bereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and compilet to the best of my knowledge and belief  Signature  Lowell S. Dunn TI  Vice President  Tule  Tule	If this production is commingled with that IV. COMPLETION DATA	from any other lease or pool, give comming	gling order number:	-
Date Spudded  Date Compl. Ready to Prod  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 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. Test - MCF/D  Length of Test  Oil - Bbis.  Water - Bbis.  Gas- MCF  Gravity of Condensate  VI. OPERATOR 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  Lowell S. Dunn II  Vice President  Title  Title  Title  Triped Test Tubing Test Signature  Lowell S. Dunn II  Vice President  Title  Title  Triped Test Tubing Test Signature  Lowell S. Dunn II  Vice President  Title  Triped Test Tubing Test Signature  Lowell S. Dunn II  Vice President  Title  Title  Title  Total Depth  PDATA Total Pepth  Tubing Depth  Tubing Dep	Designate Type of Completion	Oil Well Gas Well	New Well Workover [	Deepen Plug Back Same Res'v Diff Res'v
Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Top Oil/Gas Pay  Tubing Depth  Tubing Depth  Tubing Depth  Tubing 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 exceed top allowable for this depth or be for full 24 hours.)  Date First New Oil Run To Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. Test - MCF/D  Length of Test  Oil - Bbls.  Water - Bbls.  Gas- MCF  Gravity of Condensate  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and compiled to the best of my knowledge and belief  Signature  Lowell S. Dunn II  Vice President  Tritle  Title  Title  Title  Tubing Depth  Tubing Producing Formation Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Date Approved  By  Tobal Tubing Depth  Tubing Depth  Tubing Producing Formation Tubing Pressure (Shut-in)  Date Approved  By  Tobal Tubing Depth  Tubing Depth  Tubing Pressure Tubing Pressure (Shut-in)  Date Approved  By			Total Depth	P.B.T.D.
Perforations  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 exceed top allowable for this depth or be for full 24 hours.)  Date First New Oil Run To Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Casing Pressure  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Lowell S. Dunn II Vice President  Title  Title	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Top Oil/Gas Pay		
TUBING, CASING AND CEMENTING RECORD  TUBING, CASING AND CEMENTING RECORD  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 exceed top allowable for this depth or be for full 24 hours.)  Date First New Oil Run To Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Choke Size  Gas- MCF  Gravity of Condensate  Testing Method (puot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been completed with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Lowell S. Dunn II  Vice President  Title  T		Troducing Formation		Tubing Depth
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 exceed top allowable for this depth or be for full 24 hours.)  Date First New Oil Run To Tank  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  Gravity of Condensate  Testing Method (puot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR 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 Lowell S. Dunn II  Vice President  Title  Title	Perforations			Depth Casing Shoe
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 exceed top allowable for this depth or be for full 24 hours.)  Date First New Oil Run To Tank  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  Gravity of Condensate  Testing Method (puot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR 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 Lowell S. Dunn II  Vice President  Title  Title		TUBING, CASING AND	CEMENTING RECORD	
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 Tank    Date of Test   Producing Method (Flow, pump, gas lift, etc.)    Length of Test   Tubing Pressure   Casing Pressure   Choke Size	HOLE SIZE			SACKS CEMENT
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 Tank  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas- MCF  Gravity of Condensate  Actual Prod. Test - MCF/D  Length of Test  Bbls. Condensate/MMCF  Gravity of Condensate  Testing Method (puot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Ohoke Size  OIL CONSERVATION DIVISION  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Lowell S. Dunn II Vice President  Printed Name  Title				
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 Tank    Date of Test   Producing Method (Flow, pump, gas lift, etc.)    Length of Test   Tubing Pressure   Casing Pressure   Choke Size				
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 Tank    Date of Test   Producing Method (Flow, pump, gas lift, etc.)    Length of Test   Tubing Pressure   Casing Pressure   Choke Size	V. magazini			
Date First New Oil Run To Tank  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas- MCF  Gravity of Condensate  Testing Method (puot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR 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 Lowell S. Dunn II  Vice President Printed Name  Title				
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  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR 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.  Date Approved  By  Title		:	, and the second property	5-0-19-1, 010-7
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)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR 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.  Date Approved  By  Title	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
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. OPERATOR 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  Lowell S. Dunn II  Vice President  Printed Name  Title	Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF
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. OPERATOR 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  Lowell S. Dunn II  Vice President  Printed Name  Title	GAS WELL			
VI. OPERATOR 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.    Date Approved		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
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.    Date Approved   By   By   By   By   By   By   By   B	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
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.    Date Approved   By   By   By   By   By   By   By   B	VI. OPERATOR CERTIFIC	ATE OF COMDITANCE		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By  Lowell S. Dunn II Vice President  Printed Name  Title	I hereby certify that the rules and regula	ations of the Oil Conservation	OIL CONSE	ERVATION DIVISION
Signature Lowell S. Dunn II Vice President  Printed Name Title	Division have been complied with and t	that the information given above		118 2 J 1991
Signature  Lowell S. Dunn II Vice President  Printed Name  Title		1	Date Approved	One way
Signature  Lowell S. Dunn II Vice President  Printed Name  Title	Muellelle	un_		
Printed Name Title	Signature		By	
0/3/91 (305) 871_8300 B THE			Title	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.