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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-110  
Effective 1-1-65

**< DEVIATION SURVEYS - ATTACHED >  
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Operator <b>AMOCO PRODUCTION COMPANY</b>		<b>JUL 28 1976</b>	
Address <b>P.O. DRAWER A, LEVELLAND, TEXAS 79338</b>		<b>O. C. C.</b>	
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input type="checkbox"/>		Other (Please Explain) <b>ARTESIAN OFFICE</b>	
Change in Transporter of: Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/>		Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of ownership give name and address of previous owner		<b>CASINGHEAD GAS MUST NOT BE FLARED AFTER 9-21-76 UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED</b> <b>Eq # 2-188</b>	

II. DESCRIPTION OF WELL AND LEASE		Lease No.	
Lease Name <b>OLD INDIAN DRAW UNIT</b>	Well No. <b>10</b>	Pool Name, Including Formation <b>INDIAN DRAW Delaware</b>	Kind of Lease <b>FED</b>
Location Unit Letter <b>C</b> : <b>997</b> Feet From The <b>NORTH</b> Line and <b>1785</b> Feet From The <b>WEST</b>		Lease No. <b>NM 0415688-A</b>	
Line of Section <b>18</b> Township <b>22-S</b> Range <b>28-E</b> , NMPM, <b>EDDY</b> County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>THE PERMIAN CORP. (TRUCKS)</b>	Permian (Eti. S)	<b>P.O. Box 1183 HOUSTON, TEXAS</b>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit <b>J</b>	Sec. <b>18</b>	Twp. <b>22</b>
	Rge. <b>28</b>	Is gas actually connected? <b>No</b> When	

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

IV. COMPLETION DATA		Oil Well		Gas Well		New Well		Workover		Deepen		Plug Back		Same Res'v.		Diff. Res'v.	
Designate Type of Completion - (X)		<b>X</b>				<b>X</b>											
Date Spudded <b>6/27/76</b>		Date Compl. Ready to Prod. <b>7/21/76</b>		Total Depth <b>3450'</b>		P.B.T.D. <b>3450'</b>											
Elevations (DF, RKB, RT, GR, etc.) <b>3098.88 RDB</b>		Name of Producing Formation <b>DELAWARE</b>		Top Oil/Gas Pay <b>3256'</b>		Tubing Depth <b>3294'</b>											
Perforations <b>3256' - 3289' Delaware</b>						Depth Casing Shoe											
TUBING, CASING, AND CEMENTING RECORD																	
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT											
<b>14 3/4"</b>		<b>10 3/4"</b>		<b>409'</b>		<b>450 SX</b>											
<b>7 7/8"</b>		<b>5 1/2"</b>		<b>3450'</b>		<b>750 SX</b>											

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 Tanks <b>7-21-76</b>	Date of Test <b>7-21-76</b>	Producing Method (Flow, pump, gas lift, etc.) <b>PUMP</b>	
Length of Test <b>24 HRS.</b>	Tubing Pressure <b>-</b>	Casing Pressure <b>-</b>	Choke Size <b>-</b>
Actual Prod. During Test <b>133</b>	Oil-Bbls. <b>126</b>	Water-Bbls. <b>7</b>	Gas-MCF <b>TSTM</b>

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.

043-NMOCC-ART  
1-DIV  
1-Susp  
1-FEL  
1-OBP  
1-RC  
2-BASS  
1-MARATHON

**Ray W. Cox**  
(Signature)  
**Administrative Assistant**  
(Title)  
**7/26/76**  
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUL 28 1976**, 19  
BY **W. A. Gressett**  
TITLE **SUPERVISOR, DISTRICT II**

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.  
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.  
Separate Forms C-104 must be filed for each pool in multiple completed wells.

# INCLINATION REPORT

OPERATOR AMOCO PRODUCTION COMPANY ADDRESS DRAWER A, LEVELLAND, TEXAS 79336

LEASE OLD INDIAN DRAW WELL NO. 10 FIELD

LOCATION 660' FWL & 330' FSL LOT 5, SECTION 18, T-22S, R-28 E

Depth	Angle (Inclination 'degrees)	Displacement	Displacement Accumulated
410	3/4	5.3710	5.3710
643	3/4	3.0523	8.4233
767	1	2.1700	10.5933
1016	1 3/4	7.5945	18.1878
1109	2	3.2457	21.4335
1359	2 3/4	12.0000	33.4335
1606	3	12.9181	46.3516
1731	3 1/2	7.6250	53.9766
1795	3 3/4	4.1856	58.1622
1951	4	10.8888	69.0510
2046	4	6.6310	75.6820
2109	3 3/4	4.1202	79.8022
2202	3 1/4	5.2731	85.0753
2237	3 1/4	1.9845	87.0598
2476	2 3/4	11.4720	98.5318
2630	2 1/4	6.0522	104.5840
2880	1 3/4	7.6250	112.2090
3027	1 1/4	3.2046	115.4136
3450	1	7.4025	122.8161

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

Cactus Drilling Company

By: *Ken Hedrick*  
Title: KEN HEDRICK, DRILLING SUPT.

## Affidavit:

Before me, the undersigned authority, appeared KEN HEDRICK known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

*Ken Hedrick*  
(Affiant's Signature)

Sworn and subscribed to in my presence on this the 15th day of July

1976

*James L. Mays*  
Notary Public in and for the County  
of Lea, State of New Mexico

Seal

MY COMMISSION EXPIRES MARCH 1, 1980