Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

Unit Letter

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

County

T	EST FOR ALLOWABLE AND AUTHORIZAT O TRANSPORT OIL AND NATURAL GAS	ION Well API No.	
1.		300392318600	
Operator AMOCO PRODUCTION COMPANY		300392318000	
AMOCO PRODUCTION CONTINI			
P.O. BOX 800, DENVER, COLORADO	O 80201 Other (Please explain)		
Reason(s) for Filing (Check proper box)	Change in Transporter of:		
New Well	Dry Gas		
Recompletion			
Change in Operator Casinghead	d Gas [] Controlled [M		
If change of operator give name and address of previous operator			
II. DESCRIPTION OF WELL AND LEA	ASE	Kind of Lease	Lease No.
Lease Name	Well No. Pool Name, Including Formation	State, Federal or Fee	
JICARILLA TRIBAL 396	3 LINDRITH GALLUP-DAKOTA, WEST		,
Location C	990 Feet From The FNL Line and 1690	Feet From The	FWL Line

Section 08 Township	23N	Range	3W	, NMPM, R	IO ARRIBA	County
III. DESIGNATION OF TRANS Name of Authorized Transporter of Oil GARY WILLIAMS ENERGY CO Name of Authorized Transporter of Casingle EL PASO NATURAL GAS COM	RPORATIO		as X	P.O. BOX 159, BLOOMF Address (Give address to which appro- P.O. BOX 1492, EL P	IELD, NN 8/413 ved copy of this form is to be so	
If well produces oil or liquids,	Unit So	i i	İ	is gas actually comiccion.	neu i	
If this production is commingled with that f	rom any other l	lease or pool, give	comming	ing order number.		

Feet From The

C

Prod.	Total Depth Top Oil/Gas	Pay		P.B.T.D. Tubing Dep		
				Depth Casi	ng Shoc	
CASING ANI BING SIZE	D CEMENTI	ING RECOI	RD T		SACKS CEM	IENT
_	BING SIZE	BING SIZE	BING SIZE DEPTH SE	BING SIZE DEPTH SET	BING SIZE DEPTH SET	BING SIZE DEPTH SET

	1	
V. TEST DATA AND REQUI	recovery of total volume of total	nust be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)
Date First New Oil Run To Tank	Date of Test	
Length of Test	Tubing Pressure	Casing Pressure Choke Size Choke Size Case MCF
Actual Prod. During Test	Oil - Bbls.	1990
		JULI 1 1330

	Actual Prod. During Test	Oil - Bbls.	JULI 1 1990	
,	GAS WELL Actual Prod. Test - MCI/D	Length of Test	Bbls. Condine CON. DIV	Gravity of Condensate
		Tubing Pressure (Shut-in)	Casing Pressure DISTA 3	Choke Size
	Testing Method (pitot, back pr.)	TANCE		ATION DUVICION

lesting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure	Gloke Size
VI. OPERATOR CERTIFIC	LATE OF COMPLIANCE	OIL CONSERV	ATION DIVISION
I hereby certify that the rules and regu	that the information given above	D. A. Turning	JUL 1 1 1990
is true and complete to the best of my	knowledge and belief.	Date Approved	1
N. Illey		By	() Chang
Signature Doug W. Whaley, Staf	f Admin. Supervisor	11	VISOR DISTRICT #3
Printed Name	Title	Title	

<u>July</u> Date

- INSTRUCTIONS: This form is to be filed in compliance with Rule 1104 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

303-830-4280 Telephone No.

2) All sections of this form must be filled out for allowable on new and recompleted wells. 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

C 104 must be filed for each pool in multiply completed wells.