0, 0, 00, 120		1 1	) · · · i
DISTRIBUTI	1		
SANTA FE	17		
FILE	1	7	
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL	1	
THANSFORTER	GAS	/	
OPERATOR	1.5		
BRODATION OF	1	$\overline{}$	

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-1

	U.S.G.S.	+-	4	AND			Effective 1-1-	65		
	} <del></del>									
	TRANSPORTER GAS /									
	OPERATOR 5	+	<del>-</del>				•• •••	•		
1.	PRORATION OFFICE	+	4			API	30-039-22000			
۵.	Operator									
	Amoco Production	Сотт	anv							
	Address	<u></u>			<del></del>		<del></del>			
	501 Airport Drive		Farmington, NM 87401							
	Reason(s) for filing (Check prope	r box	)		Other (Please	explain				
	New Well		Change in Transporter of:		Omer (Freuse	explain				
	Recompletion		Oil Dry C	Gas						
	Change in Ownership		Casinghead Gas Cond	ensate						
					L					
	If change of ownership give na and address of previous owner	me								
		٠.			<del></del>					
II. ,	DESCRIPTION OF WELL A	ND I	LEASE	•						
Ì	Lease Name		Well No. Pool Name, Including	Formation		Kind of Leas		Lease No.		
	Jicarilla Contract ]	L48	18 Otero Gallup			State, Feder	olor Fee Indian	148		
	Location					C.		-1		
	Unit Letter F;	185	O Feet From The North Li	ne and	1590	Feet From	The West			
							7.10			
Į	Line of Section 23	Tow	mship 25N Range	5W	, NMPM,	Rio	Arriba	County		
							,			
I. [	DESIGNATION OF TRANSF	PORT	ER OF OIL AND NATURAL G.				•			
İ	Name of Authorized Transporter of	011	X or Condensate	Address (Give address to which approved copy of this form is to be sent)						
- }	Plateau, Inc.			4775	Indian Sc	hool Rd.	Albuquerque,	NM 87110		
ĺ	Name of Authorized Transporter o			Address	(Give address to	which appro	ved copy of this form is t	o be sent)		
}	Northwest Pipeline Corporation P.O. Box 90 Farm					armingto	n. NM 87401			
	If well produces oil or liquids, give location of tanks.		Unit Sec. Twp. Ege.	Is gas ac	tually connected	d? Wh	en			
L			F 23 25N 5W		o		Approximately 3	0 davs		
. 1	f this production is commingle	d with	h that from any other lease or pool,	give comm	ningling order	number:				
۷. (	COMPLETION DATA		Oil Well Gas Well	1	1.5					
	Designate Type of Compl	letio	n — (X)	New Well	Workover	Deepen	Plug Back   Same Res	'v. Diff. Res'v.		
H	Date Spudded		<u>_ X</u>	X		! 		1 1		
- 1	•		Date Compl. Ready to Prod.	Total De	pth		P.B.T.D.			
-	Elevations (DE RKR RT CR	4-9-79 1-9-80 vations (DF, RKB, RT, GR, etc.) Name of Producing Formation			7700'	<del> </del>	7287'			
			Top Oil/Gas Pay		Tubing Depth					
$\vdash$	6815' GL, 6828' KB Gallup 6396'					6396'		71.96'		
- 1							Depth Casing Shoe			
┢	6396-6388', 6519'-6577', 6618'-6746'				CENTUTING DECORD		7700'	<del></del>		
-  -	HOLE SIZE	TUBING, CASING, AND C		[		T				
	12-1/4" -		9-5/8". 40#	<del> </del>	DEPTH SE	<u> </u>	SACKS CEM	ENT		
	7-7/8"		5-1/2", 17#	<del> </del>	322'		250			
上	1-1/6		2-3/8", 4.7#		7700'		1295			
		<u>-</u>	Z=3/8 , 4./#	-	7196'	<del></del>				
 ت	TEST DATA AND REQUEST	r EO	PATTOWARTE (Total	<u>.</u>			<u> </u>			
	OIL WELL	LFU		sterrecover pthorbe fo	y of total volum r full 24 hours)	e of load oil	and must be equal to or e	rceed top allow		
	Date First New Oil Run To Tanks		Date of Test	<del> </del>	Method (Flow,	pump, gas li	(t, etc.)			
	12-28-79		1-9-80		D		•			
Ti	12-28-79 Length of Test		Tubing Pressure	Casing Pr	Pimp		Choke Size	<del></del>		
	24 hours				75					
17	Actual Prod. During Test		Oil-Bbls.	Water-Bbls.		da Mer				
		1	8		10	/a/	60			
_							330			
G	FAS WELL					1	Gravity of Condensate			
	Actual Prod. Test-MCF/D	1	Length of Test	Bbis. Con	densate/MMCF	-\ JP	Gravity of Condensate			
L						101	$ CO_{LT} ^2$			
Ι.	Testing Method (pitot, back pr.)	7	Tubing Pressure (Shut-in)	Casing Pr	essure (Shut-i	<u>a)</u>	make size			
L										
. с	ERTIFICATE OF COMPLIA	ANCI	£		OIL CO	DNSERVA	TION COMMISSION			
			FEB 1 1980							
1	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.			APPROVED 19						
C				By Original Signed by FRANK T. CHAVEZ						
at										
·			TITLE SUPERVISOR DISTRICT # 3							
And the second of the second o										
Original And Cy			This form is to be filed in compliance with RULE 1104.							
E. E. SVOBODA (Signature)			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							
Τ.	•			well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.						
District Administrative Supervisor (Title)					All sections of this form must be filled out completely for allow-					
	(1 +0-2)				able 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.

Secreta Forms C-104 must be filed for each coal in multiply