DISTRIBUTION		
SANTA FE	/	
FILE	/	
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR	/	
PRORATION 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-1
Effective 1-1-65

I.

30-039-22170

Operator

Amoco Production Company

Address

501 Airport Drive   Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well ☒   Change in Transporter of: Other (Please explain)

Recompletion ☐   Oil ☐   Dry Gas ☐

Change in Ownership ☐   Casinghead Gas ☐   Condensate ☐

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Jicarilla Gas Com 35-C	1E	Basin Dakota	State, Federal or Fee Indian	35A-SW-1-4247

Location

Unit Letter __J__ ; 1520 Feet From The __South__ Line and 1520 Feet From The __East__

Line of Section 2   Township 24N   Range 5W   , NMPM,   Rio Arriba   County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐   or Condensate ☒

Plateau, Incorporated

Address (Give address to which approved copy of this form is to be sent)

4775 Indian School Rd, NE, Albuquerque, NM 8711

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)

P.O. Box 990, Farmington, NM 87401

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	2	24N	5W	No	

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'v.	Diff. Res'v.
		X	X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12-3-79	3-22-80	7189'	7151'

Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6707' GL, 6720' KB	Dakota	7013'	7079'

Perforations

7013-7030', 7045-7066'

Depth Casing Shoe
7189'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8", 24.0#	302'	315
7-7/8"	4-1/2", 11.6#	7189'	1640
	2-3/8"	7079'	

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)

Length of Test	Tubing Pressure	Casing Pressure

Actual Prod. During Test:	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2032	3 hours		

Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	1722 PSIG	1875 PSIG	.75

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.

Original Signed by
(Signature)

District Administrative Supervisor
(Title)

4-25-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 28 1980 , 19____

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

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

APR 28 1980
OIL CON. COM.
DIST. 3