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LAND OFFICE	
TRANSPORTER	OIL / GAS /
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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

30-039-22178

I. OPERATOR

Operator
Amoco Production Company

Address
501 Airport Drive Farmington, NM 87401

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
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 Jicarilla Contract 147	Well No. 6E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Indian	Lease No. 147
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Location
Unit Letter **N**; **790** Feet From The **South** Line and **1580** Feet From The **West**

Line of Section **6** Township **25N** Range **5W**, NMPM, **Rio Arriba** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Pleteau, Incorporated	Address (Give address to which approved copy of this form is to be sent) 4775 Indian School Rd., NE, Albuquerque, NM 87111
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1899, Bloomfield, NM 87413

If well produces oil or liquids, give location of tanks.	Unit N	Sec. 6	Twp. 25N	Rge. 5W	Is gas actually connected? No	When Approximately 30 days
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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					

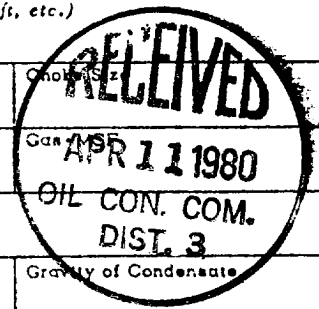
Date Spudded 12-7-79	Date Compl. Ready to Prod. 3-5-80	Total Depth 7443'	P.B.T.D. 7400'
Elevations (DF, RKB, RT, GR, etc.) 6652' GL	Name of Producing Formation Dakota	Top Oil/Gas Pay 7179	Tubing Depth 7230'
Perforations 7179-7237'			Depth Casing Shoe 7443'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8", 24.0#	307'	315 sx
7-7/8"	4-1/2", 11.6#	7443'	1650 sx
	2-3/8"	7230'	

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 Proj. Test-MCF/D 947	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 2407	Casing Pressure (shut-in) 2407	Choke Size .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
E. E. SVOBODA
(Signature)

District Administrative Supervisor
(Title)

4-8-80
(Date)

OIL CONSERVATION COMMISSION
APR 16 1980

APPROVED _____, 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 multiply