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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hubbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Anesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

1					BLE AND A							
I. TO TRANSPORT OIL AND NATURAL Operator AMOCO PRODUCTION COMPANY							Well API No. 300392248000					
Address												
P.O. BOX 800, DENVER,	COLORAI	00 8020) 1		Other	t (Please expla						
Reason(s) for Filing (Check proper box) New Well		Change in	Transn	orter of:		it (triease expia	un)					
Recompletion [Oil		Dry G									
Change in Operator		id Gas 📋										
If clainge of operator give name and address of previous operator												
II. DESCRIPTION OF WELL	AND LE		12				1 12:-4			ease No.		
Lease Name JICARILLA CONTRACT 146			Name, Including Formation ANCO P.C. SOUTH (GAS)		(GAS)	Kind of Lease State, Federal or Fe			case No.			
Location Unit LetterA	. :	870	. Feet F	rom The	FNL Line	84 e and	+0 Fe	et From The	FEL	Line		
Section 09 Township	251	N	Range	, 5W		ирм,	RTO	ARRIBA	1	County		
					D. F. O. O							
III. DESIGNATION OF TRAN	SPORTE	or Conde	IL AN		RAL GAS	e address to wi	urh appraved	copy of this	form is to be se	ent)		
Name of Authorized Transporter of Oil			ISALE							,		
GARY WILLIAMS ENERGY C Name of Authorized Transporter of Casing	ORPORA: thead Gas	TION	or Dry	Gas X	Address (Give	OX 159 , I e address to w	sch approved	copy of this	form is to be se	m)		
NORTHWEST PIPELINE COR		ON I S∞.	Twp.	l Roe	P.O. BOX 8900, S is gas actually connected?		SALT LA	KE_CITY	., UT84	108-0899		
give location of tanks.	l l	3a. 	1 mp.	""	, a gas a saudi,	,	i					
If this production is commingled with that f	rom any oth	her lease or	pool, g	ive comming	ling order numb	per:						
IV. COMPLETION DATA									-, 	_,		
Designate Type of Completion	- (X)	Oil Well	1 1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Compl. Ready to		Prod.		Total Depth		-	P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Perforations					Top Oil/Gas I	Pay		Tubing Depth				
					I			Depth Casing Shoe				
								<u> </u>				
	TUBING, CASING ANI				CEMENTI			1	CACKE CEMENT			
HOLE SIZE CASING & TUBING S			SIZE		DEPTH SET		SACKS CEMENT					
	ļ											
V. TEST DATA AND REQUES	T FOR	ALLOW	ARI F									
OIL WELL (Test must be after to	ecovery of t	otal volume	of load	oil and mus	i be equal to or	exceed top allo	owable for this	s depth or be	for full 24 hou	urs)		
Date First New Oil Run To Tank	Date of Te					ethod (Flow, pi						
Length of Test	Tubing Pr	essure			Casing Press	ıre		éhau S	IVE	M		
	Oil - Bbis.					- 127			1U)			
Actual Prod. During Test					Water - Bbls.		U/Z	Gas- MCF	5 1990			
GAS WELL					-t					1 1		
Actual Prod. Test - MCI/D	Length of	Test			Bbls. Conden	Bbls. Condensate/MMCF			Edition Line	4		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		•		
	1			NOC	-\			1				
VI. OPERATOR CERTIFIC				NCE	(DIL CON	SERV.	ATION	DIVISIO	NC		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					`			- 4000				
is true and complete to the best of my l					Date	Approve	d	JUL	U 10011			
NIL.A.						, , ,pp,010	7	. \ 4	2/	,		
Signature Signature					By_		<u>ه</u>	,, , , , , , , , , , , , , , , , , , ,	Juny			
Boug W. Whaley, Star	tt Admi	in. Sup	ervi Tule	sor	7-:41-		ŞUPE	RVISOR	DISTRIC	T #3		
June 25, 1990				4280	Title							

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
- 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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III		S	Santa F	e, New I	Mexico 87.	504-2088						
1000 Rio Hrazus Rd., Aztec, NM 87416	REC	UEST I	FOR A	ALLOWA PORT O	ABLE AND	AUTHOF	RIZATIO	N				
ANGEO TRODUCTION COMPANY								ell API No.	II API No. 20392248000			
P.O. BOX 800, DENVER	COLORA	ADO 803	201					00332248				
Reason(s) for Filing (Check proper box)	COHOR				<u> </u>	ther (Please ex	plain)					
New Well	Oil		in Transp Dry C	orter of:		·	'					
Change in Operator If change of operator give name and address of previous operator	Casingho	ad Gas	Cond	nsale X								
II. DESCRIPTION OF WELL	. AND LE	CASE										
Lease Name JICARILLA CONTRACT 14 Location	lame, Inclu ERO CHA	ding Formation CRA (GAS	s)		nd of Lease te, Federal or F	of Lease Lease No.						
Unit LetterA	_ :	870	_ Fea F	rom The _	FNL Li	ne and8	340	Feet From The	FEI.	Line		
Section ()9 Townsh	<u>25</u>	N	Range	5W		МРМ,	R	to Arriba	1	County		
III. DESIGNATION OF TRAI	NSPORTE	ER OF O	IL AN	D NATI	IRAL GAS					County		
Name of Authorized Transporter of Oil GARY, WILLIAMS, ENERGY		or Conde	nsale		Address (Gi	ve address to m		ed copy of this		enı)		
Name of Authorized Transporter of Casir	Gas [X]	P.O. BOX 159 BLOONFIELD NM 87413 Address (Give address to which approved copy of this form is to be sent)										
NORTHWEST PIPELINE CORPORATION If well produces oil or liquids, Unit Sec. Twp.				Ruc	P. O. BOX 8900, SALT LAKE CITY, UT 84108 c. Is gas actually connected? When?							
give location of tanks. If this production is committed with that			İ	1	, , , , , , , , , , , , , , , , , , ,	y connected?						
If this production is commingled with that IV. COMPLETION DATA	TOTAL STATE OF	er lease or	pool, giv	e comming	ling order num	ber:						
Designate Type of Completion	- (X)	Oil Well	(ias Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Comp	. Ready to	Prod.		Total Depth		.l	P.B.T.D.	l	-l		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Perforations					Top Oil/Gas I	Pay		Tubine Deni	Tubing Depth			
				- 								
	·	LIBING						Depth Casin	g Shoe			
HOLE SIZE CASING & TUBING SIZE					D CEMENTING RECORD DEPTH SET			SACKS CEMENT				
									ONORO OCINETI			
								_				
. TEST DATA AND REQUES	T FOR A	LLOWA	BLE									
OLL WELL (Test must be after reduce First New Oil Run To Tank	Date of Test	al volume o	fload oi	l and musi	be equal to or e	exceed top allo	wable for the	s depth or be fo	or full 24 hour.	s.)		
ength of Test						hod (Flow, pur	mp, gas iyi, i	tic.)				
	Tubing Pressure			Casing Pressur	•	ര	Chole Size	IVE	<u>m</u>			
ctual Prod. During Test Oil - Bbls.					Water - Bbls.			Gas- MCF				
GAS WELL				l			<u>UU</u>	JUL 5	1990			
ctual Prod. Test - MCF/D	Length of Te	ral .			Bbls. Condens	w/MMCF		HL-EO	VIG. PL	•		
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)						Choke Size	3				
I. OPERATOR CERTIFICA	TE OF (OMPL	JANC	E				L				
I hereby certify that the rules and regulati Division have been complied with and th	ons of the O	il Conserva	tion		0	IL CON	SERVA	ATION D	IVISIO	V		
is true and complete to the best of my kn	owledge and	belief.	-		Date A	Approved		JUL	5 1990			
L. H. Shley						4-1 2.00			1			
Sunature Boug W. Whaley, Staff Admin. Supervisor					By 3 A Cheer							
Panted Name June 25, 1990		T	lic	H	Title_		Sul	PERVISOR	DISTRIC	T #\$		
Date		.303-83 Telepho	u∺42≿ and No	ւս								

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