SERVATION DIVISION

P. O. BOX 2088

FE, NEW MEXICO 87501

MOT MELLMEN.	WC2 DEAMAINGAL	OIL CON
DISTRIBUTS SANTA FF FILE	он	SANTA
LAND OFFICE	01,	REQ
OPERATOR	GAE	AUTHORIZATION T
PROBATION OF	ranger III	

UEST FOR ALLOWABLE

TRANSPORTER OIL		4A	ND		•			
OPERATOR GAE	AUTHORIZATIO	ON TO TRANSF	PORT OIL AND NATU	RAL GAS				
I. PROMATION OFFICE								
Operator Com	2001							
Amoco Production Com	Jany							
501 Airport Dr., Fari	nington, NM 874	01		•				
Reason(s) for filing (Check proper t	10x)		Other (Please	e explain)				
New Well	Change in Transp	porter of:			•	•		
Recompletion	Cil	Dry Go:	s [_]		•			
Change in Ownership	Casinghead Gas	Conden	sate					
If change of ownership give name	•		•					
and address of previous owner	·		<u> </u>					
	n r macro	÷						
II. DESCRIPTION OF WELL AN	Well No. Pool N	lame, including F	ormation	Kind of Lease		Jicarifla		
Jicarilla Contract 1	46 39 Ote	ero Chacra		State, Federa	orFee Federal	Contract		
Location			·			146		
Unit Letter J : 1	600 Feet From The	South Lin	e and 1780	Feet From T	he East	<u> </u>		
Oliv Levier								
Line of Section 3	Township 25N	Range 5	W , NMPL	, Rio A	rriba	County		
II. DESIGNATION OF TRANSPO	ORTER OF OIL AND OIL or Condense	NATURAL GA	Address (Give address	to which approx	ed copy of this form is	to be sent)		
Name of Authorized Transporter of	or condense							
Name of Authorized Transporter of	Casinghead Gas or	Dry Gas 😿	Address (Give address	to which approx	ed copy of this form is	to be sent)		
Northwest Pipeline C				P. O. Box 90, Farmington, NM 87401				
	Unit Sec. 7	Twp. Rge.	is gas actually connect					
If well produces oil or liquids, give location of tanks.	J 3 2	25N \ 5W	No					
If this production is commingled	with that from any othe	r lease or pool,	give commingling orde	r number:				
IV. COMPLETION DATA				Deepen	Plug Back Same Re	s'v. Dill. Res'v.		
Designate Type of Comple	etion - (X)	į.	!	Deepen	Tring Back Same No.	1		
	Date Compl. Ready to	X	X Total Depth		P.B.T.D.			
Date Spudded	10-6-81	o Piou.	5407'		5253'			
12-30-80		ormation	Top Oil/Gas Pay		Tubing Depth			
Elevations (DF, RKB, RT, GR, etc 6605 G.L.	Otero Chacra		3782¹	•	3781 '			
Perforations			<u> </u>		Depth Casing Shoe			
3782*-380					5407			
			CEMENTING RECO		T			
HOLE SIZE	CASING & TU	BING SIZE	DEPTH S	ET	SACKS CE	MENT		
12-1/4"	8-5/8"		303'		300 sx 955 sx			
7-7/8"	5-1/2"		5407' 3781'		933 SX			
	1-1/4"		3/01					
		TO SEL	The section of sections	uma of load oil	and must be equal to or	exceed top allow		
V. TEST DATA AND REQUEST	FOR ALLOWABLE	able formulate	of the forfull 24 hour	٠٤)				
OIL WELL Date First New Oil Run To Tanks	Date of Test	Win.	Producing M thed (Flo	w, pump, gas li	ft, etc.)			
			Producing Method (Flo 9 1981 Com. N. COM.					
Length of Test	Tubing Pressure	DECS	COMPRESSION	•	Choke Size			
		1 m CC	N, CO.		Gan-MCF			
Actual Prod. During Test	O11-Bb!s.	John D	Shies Bele		1			
GAS WELL	Length of Test		Bbls. Condensate/MM0	CF	Gravity of Condensat	•		
Actual Prod. Tool-MCF/D 1673	3 hours		.					
Testing Method (pitot, back pr.)	Tubing Prensus (Sh	ut-1n)	Cosing Pressure (Ehu	t-in)	Choke Size			
Back pressure	878 PSIG		884 PSIG		.75"			
1. CERTIFICATE OF COMPLI	ANCE		OIL O	CONSERVA	TION DIVISION			
I. CERTIFICATE OF COMPER	1102		_	IANE	1982			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			APPROVED JAN 6 1982					
			Original Signed by FRANK T. CHAVEZ SUPERVISOR DISTRICT # 3					
above is true and complete to	the best of my knowle	age kild belief.						
	Ru		TITLE					
	Original Signed By E. E. SVOSODA		This form is	to be filed in	compliance with RUL	E 1104.		
	E. L. 5703007		If this is a re-	quest for allo	wable for a newly dril	lied or deepend of the deviatio		
	Signature)		Il seems taken on the	woll in acco	MARUCA MINI HOFF I			
District Administra	tive Supervisor		All sections	of this form m	ust he filled out comp	dately for plice		

(Title)

(Dute)

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.

Imparate Forces Celles must be filled for each pool to enderly the condition of the conditi