OIL CONSERVATION DIVISIO P. O. BOX 2088 SANTA FE, NEW MEXICO \$7501

231 364.F 1730E-6.0				
##. 64 1 . PHE P4E				
DISTRIBUTE	Эн			
SANTAFF				
FILF				
U.S.G.S.				
LAND OFFICE				
THANSPORTER	OIL			
	GAL			
OPERATOR				
PROPATION OFFICE				

	THANSPORTER OIL AND NATURAL GAS										
1.	PAGRATION OFFICE										
	Amaca Production Compa	moco Production Company									
	ddrens .										
	501 Airport Drive, Farmington, NM 87401 Records) for filing (Check proper box) Other (Please explain)										
	New Woll	Change in Transporter of:									
	Recompletion	Oil Dry Gas									
	Change in Ownership	Casinghead Gas Conden	densate \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \								
	If change of ownership give name										
	and address of previous owner										
IJ.	DESCRIPTION OF WELL AND	Kind of Lease	ise Lease No.								
	Lease Name	Well No. Pool Name, Including For			Jicarilla						
	Jicarilla Contract 146 37 Otero Chacra			Federal Cont. 146							
		Unit Letter C : 1070 Feet From The North Line and 1750 Feet From The West									
	Unit Letter 0					_					
	Line of Section 4 To	waship 25N Range 5	W , NMPA	۸, San	Juan	County					
17	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S								
11.	Name of Authorized Transporter of Oil	IGNATION OF TRANSPORTER OF OIL AND NATURAL GAS of Authorized Transporter of Oil or Condensate Address (Give address to which									
			Address (Give address to which approved copy of this form is to be sent)								
	Name of Authorized Transporter of Cas	P.O. Box 990, Farmington, NM 87401			,						
El Paso Natural Gas Company Unit Sec. Twp. Rge.		Is gas actually connect									
	If well produces oil or liquids, give location of tanks.	C 4 25N 5W	No								
	If this production is commingled wi	th that from any other lease or pool,	give commingling orde	er number:							
Υ.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Re	s'v. Diff. Res'v.					
	Designate Type of Completion	on – (X)	X	· ·	1						
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.						
	12-18-80	4-21-81	5376 Top Oil/Gas Pay	<u> </u>	5331 Tubing Depth						
	Elevations (DF, RKB, RT, GR, etc.; Name of Producing Formation 6601 GL Otero Chacra		3750 '		3789'						
	Perforations				Depth Casing Shoe						
	3750-3776	CEUEVITING BECORD		3376							
	TUBING, CASING, AND HOLE SIZE CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT						
	12 1/4"	8 5/8" 24#	285		315 sx						
	7 7/8"	4 1/2" 15.5#	5376'		1110 sx						
		1 1/4"	3789'								
		OR ALLOWABLE (Test must be a	(of total wal	ume of load oil	and must be equal to or	exceed top allow-					
Υ.	TEST DATA AND REQUEST F	oh Allowable for this de	1,212 0. 00 10 1	- •							
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	w. pump, gas li	jt, eic.)						
		Tubing Pressure	Casing Pressure		CHERENT						
	Length of Test				/ RELLIVE	77					
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.		Got-MCF	,, \					
					JUL 7 - 198						
	OAC WELL	, Y				OIL CON. COM.					
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	CF	Covity DESalson 3at						
	1090	3 Hrs.	Cosing Pressure (Shu	n. (n.)	Choke Size						
	Testing Method (puot, back pr.)	Tubing Pressure (shut-in)	1		.75"						
Back Pressure 778 psig		788 psig .75" OIL CONSERVATION DIVISION									
VI.	ERTIFICATE OF COMPLIANCE		41		AUG 11	1981					
	I hereby certify that the rules and	ereby 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.			Original Signed by FKANK 1. CHAVEZ								
			TITLE SUPERVISOR DISTRICT # 3			# 3					
	Orlainal	Signed By	[i			£ 1104.					
E. E. SVOBODA			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despendently.								
	(Sign	well, this form mu	well, this form must be accompanied by a tabulation of the deviation thanks taken on the well in accordance with NULE 111.								
	District Administrat	ive Supervisor	All amotions (of this form on	gmed the filled out comp	letaly for allow					
	. -	ula)	able on new and t	rochmplated w	المعارف						

JUL 6 1981

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 flied for each pool in multiply condition wells.