Submit 5 Copies
Appropriate District Office
DISTRICT 1

O That 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions

P.O. BOX 1980, 10006, NM 88240	OIL C	ONSERVA	TION D	IVICIO	N	/	at Bottom of Page	
DISTRICT II P.O. Drawer DD, Anesia, NM 88210	OILC		ox 2088	1 1 1310	14			
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		ita Fe, New M	lexico 8750	4-2088				
	REQUEST FO							
I. Operator	IO THAI	NSPORT OI	L AND NAT	UHAL G		API No.		
AMOCO PRODUCTION COMP	'ANY					392252300		
Address P.O. BOX 800, DENVER,	COLORADO 8020	1						
Reason(s) for filing (Check proper box)	**		Othe	t (Please expl	ain)			
New Well		Transporter of: Dry Gas						
Recompletion		Condensate X						
If change of operator give name and address of previous operator		(A)						
II. DESCRIPTION OF WELL	AND LEASE							
Lease Name	Well No.	Pool Name, Includ				of Lease	Lease No.	
JICARILLA CONTRACT 14	6 37	OTERO CHA	CRA (GAS)		State,	Federal or Fee	L	
Unit LetterC	1070	Feet From The	FNL Line	and17	750 Fe	et From The	FWL Line	
Section 04 Townsh	_{hip} 25N	Range 5W	, NM	IPM,	RIC	ARRIBA	County	
III. DESIGNATION OF TRAI						*		
Name of Authorized Transporter of Oil	or Condens			address to w	tich approved	copy of this form	is to be sent)	
CARY WILLIAMS ENERGY			P.O. BO	X 159, I	SLOOME I E	LD, NN 8	7413	
Name of Authorized Transporter of Casi	-	or Dry Gas 💢	1			copy of this form	-	
NORTHWEST PIPELINE CO. If well produces oil or liquids,		wp. Rgc.	ls gas actually	x 8900, connected?	SALT LA When	KE_CITY 7	UT84108-089	
hive location of tanks.			<u> </u>		i			
If this production is commingled with that IV. COMPLETION DATA	t from any other lease or p	ool, give comming	ling order numbe)r:				
Designate Type of Completion	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Sa	nic Res'v Diff Res'v	
Date Spudded	Date Compl. Ready to I	Prod.	Total Depth		l	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing For	mation	Top Oil/Gas Pa	ay .		Tubing Depth		
Perforations						Depth Casing Shoe		
						Depin Cashig S	noe	
		CASING AND	CEMENTIN	G RECOR	D	,		
HOLE SIZE	CASING & TUE	CASING & TUBING SIZE				SAC	CKS CEMENT	
			-					
 V. TEST DATA AND REQUE	ST FOR ALLOWA	RLE				l		
	recovery of total volume o	-	be equal to or e	exceed top allo	wable for this	depth or be for j	full 24 hours.)	
Date First New Oil Run To Tank	Date of Test		Producing Met			· - · · ·		
Length of Test	Tubing Pressure		Casing Pressure	e	~ =	Quota Size	T (S)	
	<u> </u>		ļ		(D) R	GEIV		
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.		W.	100	שו	
GAS WELL					J	UL 5 199		
Actual Frod. Test - MCF/D	Length of Test		Bbls. Condens	atc/MMCF	OIL	TOOK !	91V	
	Tubing Pressure (Shut-i	a)	Carles Pressure	Chul in		DIST2	a king a same	
Testing Method (pitot, back pr.)	ruoning rressure (Situe-t	,,	Casing Pressur	e (sam-m)		Chore 2126		
VI. OPERATOR CERTIFIC	CATE OF COMPI	JANCE			IOED) (TION D	MOLON	
I hereby certify that the rules and regu			0	IL CON	SEHV	ATION DI	VISION	
Division have been complied with and is true and complete to the best of my		I WOUNG	Dota	Annrous	A	1111 5 19	19(1	
11/1/100			Date	Approve	u	JUL 5 15	,,,,,	
L.P. Whley			Ву		_	s d		
Signature Doug W. Whaley, Sta	ff Admin. Supe	rvisor	-, -		0-0	C - North Comment	5	
Printed Name	,	l'itle	Title		SUPER	VISOR DIS	TRICT #3	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

<u>June 25, 1990</u> Date

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title

2) All sections of this form must be filled out for allowable on new and recompleted wells.

303-830-4280 Telephone No.

- 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.

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, 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

DISTRICT: U

OIL CONSERVATION DIVISION

O. Drawer DD, Anesia, NM 88210	c	anta Fe, Nev		ico 87504	-2088				
ISTRICT III									
000 Rio Braws Rd., Aztec, NM 87410	HEGOES1 I								
·	TOTA	ANSPORT	OIL	AND NAT	URAL GA	S	of No.		
Decider DODUCTION COM	DANV					Well A.	ri No. 39225230	00	
AMOCO PRODUCTION COM	FANI								
P.O. BOX 800, DENVER	, COLORADO 802	201							
Reason(s) for Filing (Check proper box				U Other	(Please explai	in)			
New Well		in Transporter of Dry Gas	i: []						
1-1	Oil L Casinghead Gas [
change in Operator [] change of operator give name address of previous operator	Cashighter of								
	LANDIEACE								
I. DESCRIPTION OF WELL Lease Name	L AND LEASE	o. Pool Name,	Includin	g Formation		Kind o	Lease		ase No.
JICARILLA CONTRACT 1		BLANCO	MES	AVERDE (PRORATED	GA State, I	ederal or Fee	:	
Location C	1070		_	FNL Line	17	50	t From The .	FWL	Line
Unit Letter		Feet From T		Line	and				
Section 04 Town	ıship 25N	Range	5W	, NM	IPM,	NIO -	ARRIBA		County
II. DESIGNATION OF TR	ANSPORTER OF	OIL AND N	ATUF	RAL GAS					
Name of Authorized Transporter of Oi	or Cond	densate [X]		Address (Give	address to wh	ich approved	copy of this fo	orm is to be se	ru)
GARY WILLIAMS ENERGY	CORPORATION		1	P.O. BO	X_159,_F	LOOMF 1E	LD, NM	87413 orm is to be se	n/)
Name of Authorized Transporter of Ca	ssinghead Gas	or Dry Gas	ואו						
NORTHWEST PIPELINE C If well produces oil or liquids, ive location of tanks.	CORPORATION	Twp.	Rge.	Is gas actually	connected?	When	7	, UT 84	100-00
f this production is commingled with t	hat from any other lease	or pool, give cor	mmingli	ng order numb	ег:				
V. COMPLETION DATA				N W. 10	Madana	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completi	on - (X)	/ell Gas V 	well	New Well	WOLLOVEI		1 toB track		İ
Date Spudded	Date Compl. Ready	y to Prod.		Total Depth			P.B.T.D.	•	
				Top Oil/Gas I	Day		Tubing Don		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	1 toursmon		Top ois out its			Tubing Depth		
Perforations							Depth Casing Shoe		
					10.0000				
				CEMENTING RECORD			SACKS CEMENT		
HOLE SIZE	CASING &	TUBING SIZE			DEPTH SET			SACKS CLIVI	
				ļ			ــــــــــــــــــــــــــــــــــــــ		
V. TEST DATA AND REQU OIL WELL (Test must be a)	UEST FOR ALLO Ser recovery of total volu	WABLE me of lord oil as	nd must	be equal to or	exceed top allo	owable for thi	s depth or be	for full 24 hou	rs)
Date First New Oil Run To Tank	Date of Test	, , , , , , , , , , , , , , , , , , ,		Producing Me	thod (Flow, p	ump, gas lift, e	uc.)		
							Choke Size		
Length of Test	Tubing Pressure			Casing Press	ire	-	CHOKE SIZE	44 / 100 / 100	
	Oil - Bbls.			Water - Bbis.		(D) E	S. C.	4 F W	1
Actual Prod. During Test	Oil - Bois.					N			<u> </u>
GAS WELL						JL	L 5 19	90	
Actual Prod. Test - MCF/D	Length of Test			Bbls. Conder	sate/MMCF	OIL	Cicylly of	CHANGE	•>
						OIL!		THE ST	
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)		Casing Press	ure (Shut-in)		DIST.SU	;	
VI. OPERATOR CERTII	EICATE OF CO	MPLIANC	F	\r					
VI. OPERATOR CERTII Thereby certify that the rules and	TICATE OF COL	azervation	L	(ISERV	ATION	DIVISIO	NC
Division have been complied with	and that the information	given above						5 1990	
is true and complete to the best of my knowledge and belief.				Date ApprovedJUL5			0 1330		
11.1 ////	<i>'</i>				• •			Λ	,

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Whaley, Staff Admin.

Signature Doug

Printed Name

June 25, 1990

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

By.

Title

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Supervisor Tale

303-830-4280_ Telephone No.

- 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.

Location of Well: 004

Page 1

OIL CONSERVATION DIVISION NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Operator: AMOCO PRODUCTION COMPANY Lease/Well #:JIC CONTRACT 146 37
Meter #:85518 RTU:1-132-01 County:RIO ARRIBA

Me	ter #:85518	;	RTU:	1-132-01	C	count	y:RIO ARR	IBA	
	NAME RESE	RVOIR OR 1	POOL		TYPE PROD	MET	HOD PROD	ME	EDIUM PROD
UPR	OTERO CHAC	RA		B5528	GAS		FLOW		TBG
COMP			/	131-1					
LWR BLANCO MESAVERDE			85518 GAS		GAS	FLOW		TBG	
COMP			1.	132-1					
		PR	E-FLOW	SHUT-IN	PRESSURE DA	TA		1	
	Hour/Date	Shut-In	Leng	th of Tim	e Shut-In	SI	Press. PS	IG	Stabilzed
UPR	11/19/90		<u> </u>	72 Hours					
COMP							486		ves
LWR	11/19/90			72 Hour	S				
COMP							187		nes
	.			FLOW TEST	DATE NO.1				
Comme	nced at (ho	our,date)*					Zone Prod	uci	ng (Upr/Lwr)
	TIME	LAPSED	TIME	PR	ESSURE	-	Prod		
(hc	our, date)	SINCE	1	Upper	Lower		Temp.	R	EMARKS
1	1/19/90	Day	1	2 3		-		Bot	h Zones SI
1	.1/20/90	Day	2		194			Bot	h Zones SI
1	.1/21/90	Day	3	463	134			Bot	h Zones SI
1	.1/22/90	Day	4	236	et ing	,		,	0 - LEWE
3	1/23/90	Day	5				Ma	Wes	Classer Zon
<u> </u>	1/24/90	Day	6	537	24%			, ("
	ction rate			on	BBLs in		Hrs	Gra	v GOR
Gas:		······································	MFCPD	:Tested t	heu (Orifi	ce or	r Meter):M		
			MID-TE	ST SHUT-I	N PRESSURE	DAT	A		
UPR COMP	Hour, Dat	e SI Len	gth of	Time SI	SI Press	. PS	KEW		eyes(no)
LWR COMP							OIL C		DIV

(Continue on reverse side)

ान	0	W	TEST	NO	7

Commenced at (hour, da	ate)本本		Zone producing (Upp	per or Lowert			
TIME	LAPSED TIME	PRESSURE		PROD. ZONE			
(hour, dete)	SINCE **	Upper Completion	Lower Completion	TEMP.	REMARKS		
			•	İ	• •		
		<u> </u>	<u> </u>	<u> </u>			
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			1				
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		1					
		1					
roduction rate of	_	D based on	Bbls. in	Hours.	Grav GOR		
.		MCF	DD: Terral chas	(Osifica on Massa)):		
			rD. Tested tillig	(Office of Meter)) 		
emarks:							
			·				
hereby certify the	hat the informati	on herein contain	ed is true and co	mplete to the best	of my knowledge.		
Approved			_19	perator	know I god.		
New Mexico O	il Conservation I	Division .	•		allas		
Ву	jinal Signed by CH/	· · _ · _ · _ · · _ · · · · · · · ·	T	ide delle	I tech		
	AUTY OIL & GAS IN	ISPECTOR, DIST. #3		1	1 landa		
Title	<u> </u>		T	$\rho_{\rm ate} / / \sigma$	(1/8/70		

NORTHWEST NEW MEXICO PACKER LEAKAGE TEST INSTRUCTIONS

- 1. A packer leakage test shall be commenced on each multiply completed well within seven days after actual completion of the well, and annually thereafter as prescribed by the order authorizing the multiple completion. Such tests shall also be commenced on all multiple completions within seven days following recompletion and/or chemical or fracture treatment, and whenever temedial work has been done on a well during which the packer or the tubing have been disturbed. Tests shall also be taken at any time that communication is suspected or when requested by the Division.
- 2. At least 72 hours prior to the commencement of any packer leakage : sat, the operator shall notify the Division in writing of the exact time the test is to be commenced. Offset operators shall also be so notified.
- 3. The packer leakage test shall commence when both zones of the dual completion are shur-in for pressure stabilization. Both zones shall remain shur-in until the well-head pressure in each has stabilized, provided however, that they need not remain shur-in more than seven days.
- 4. For Flow Test No. 1, one zone of the dual completion shall be produced at the normal rate of production while the other zone remains shur-in. Such test shall be continued for seven days in the case of a gas well and for 24 hours in the case of an oil well. Note: if, on an initial packer leakage test, a gas well is being flowed to the atmosphere due to the lack of a pipeline connection the flow period shall be three hours.
- 5. Following completion of Flow Test No. 1, the well shall again be shut-in, in accor-

- that the previously produced zone shall remain shut-in while the zone which was previously shut-in is produced.
- 7. Pressures for gas-zone tests must be measured on each zone with a adweight pressure gauge at time intervals as follows: 3 hours tests: immediately prior to the beginning of each flow-period, at fifteen-minute intervals during the first hour thereof, and at hourly intervals thereafter, including one pressure measurement immediately prior to the conclusion of each flow period. 7-day tests: immediately prior to the beginning of each flow period, at least one time during each flow period (at approximately the midway point) and immediately prior to the conclusion of each flow period. Other pressures may be taken as desired, or may be requested on wells which have previously shown questionable test data.

24-hour oil zone texts: all pressures, throughout the entire text, shall be continuously measured and recorded with recording pressure gauges the accuracy of which must be checked at least twice, once at the beginning and once at the end of each text, with a deadweight pressure gauge. If a well is a gas-oil or an oil-gas dual completion, the recording gauge shall be required on the oil zone only, with deadweight pressures as required above being taken on the gas zone.

8. The results of the above-described tests shall be filed in triplicate within 15 days after completion of the test. Tests shall be filed with the Azter District Office of the New Mexico Oil Conservation Division on Northwest New Mexico Packer Leakage Test Form Revised 10-01-78 with all deadweight pressures indicated thetene as well as the floring