NO. OF COMER MECHINED &			
DISTRIBUTION	HEW MEXICO OIL CO	ONSERVATION COMMISSION	Form C-104
SANTA FE	REQUEST I	FOR ALLOWABLE	Supersedes Old C-104 and C-1
FILE 1 2		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (GAS TO THE RESERVE TO
LAND OFFICE	-1		
TRANSPORTER OLL	-		
OPERATOR /	-		
PROPATION OFFICE	-		2 9374
Operator			
AMOCO PRODUCTION CO	MPANY		ON. COM.
Address 501 Airport Drive.	Farmington, New Mexico	87401	0.51.3
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Otl Dry Ga	s X	
Change in Ownership	Casingheaa Gas Conden	sate	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND Lease Name	LEASE Well No. Pool Name, Including Fe		Leneror
Jicarilla Contract 155	3 19 Basin Dakota	State, Feder	al or Fee Jic. Contract 155
Location	Feet From The North Lin	e and 790 Feet From	The East
Unit Letter;;		a de la companya de l	
Line of Section 29 To	wnship 26N Range	5W , NMPM, Rio	Arriba County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	Address (Give address to which appr	oved copy of this form is to be sent)
Name of Authorized Transporter of Ci	or Condensate 🗶	Box 108, Farmington, h	
Plateau Inc. Name of Authorized Transporter of Co	singhead Gas or Dry Gas X	Address (Give address to which appro	oved copy of this form is to be sent)
Name of Authorized Transporter of Co. Northwest Pipeline Co.		501 Airport Drive, Far	
	Unit Sec. Twp. Age.		nen
If well produces oil or liquids, give location of tanks.	I 30 26N 5W	Yes	2-27-67
7	ith that from any other lease or pool,	give commingling order number:	
COMPLETION DATA			Plug Back Same Res'v. Diff. Res'
Designate Type of Completi	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res V. Dill. Res
		Total Depth	P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Deptin	
Floring (DE DVD DT CD	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.,	reduce of Floadshig Comments		
Perforations			Depth Casing Shoe
Personal			
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		·	
		1	
	FOR ALLOWABLE (Test must be able for this d	after recovery of total volume of load or epth or be for full 24 hours)	i and must be equal to or exceed top all
Oll. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	
Date rist New Oil Mun To lanks			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Cil-Bbls.	Water-Bbls.	Gas-MCF
GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Buta. Condensate/mmcr	
	700	Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cashiy 1 1000 and (Date)	
		OU CONSERV	ATION COMMISSION
CERTIFICATE OF COMPLIA	NCE	Ero	
	A CONTRACTOR OF Non-Contraction	APPROVED FEB	7 1974 , 19
	regulations of the Oil Conservation with and that the information given	O-i-i-n) Ciomod	by A. R. Kendrick
Commission have been complete with site that knowledge and belief, above is true and complete to the best of my knowledge and belief.		By Original Signed by A. R. Kendrick	
		TITLE FETROLDOM ENGINEER DIST. NO. 3	
		TITLE TELE	

Original Signed by

G. L. HAMILTON

December 28, 1973

(Signature)

Area Administrative Supervisor (Title)

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.