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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator <b>AMOCO PRODUCTION COMPANY</b>	
Address <b>501 Airport Drive, Farmington, New Mexico 87401</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	To change a Dakota completion to a Dakota-Gonzales Mesaverde dual.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Jicarilla Tribal 155</b>	Well No. <b>20</b>	Pool Name, including Formation <b>Gonzales Mesaverde</b>	Kind of Lease <b>Federal</b>	Lease No. <b>Cont. 155</b>
Location				
Unit Letter <b>N</b>	<b>1160</b>	Feet From The <b>South</b>	Line and <b>1540</b>	Feet From The <b>West</b>
Line of Section <b>29</b>	Township <b>26N</b>	Range <b>5W</b>	NMPM, <b>Rio Arriba</b>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>Plateau, Inc.</b>	<b>P. O. Box 108, Farmington, New Mexico 87401</b>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>Northwest Pipeline Corporation</b>	<b>501 Airport Drive, Farmington, New Mexico 87401</b>					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas directly connected?	When
	<b>N</b>	<b>29</b>	<b>26N</b>	<b>5W</b>	<b>No</b>	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<b>X</b>		<b>Workover to Dual Complete.</b>				
Date Spudded <b>9-20-69</b>	Date Compl. Ready to Prod. <b>11-13-69 Dakota 9-29-73 Mesaverde</b>	Total Depth <b>7327'</b>	P.B.T.D. <b>7200'</b>					
Elevations (DF, RKB, RT, GR, etc.) <b>6448' KB; 6434' GL</b>	Name of Producing Formation <b>Mesaverde</b>	Top Oil/Gas Day <b>4877'</b>	Tubing Depth <b>None for Mesaverde</b>					
Perforations <b>4877-82', 4960-70', 4992-97', 5003-08', 5034-39', 5051-56', 5065-70', 5100-05', 5124-28' x 1 SPF</b>	Depth Casing Shoe <b>7326'</b>							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE <b>12-1/4"</b> <b>7-7/8"</b>	CASING & TUBING SIZE <b>8-5/8"</b> <b>4-1/2"</b> <b>2-3/8" tubing for Dakota set at 6842'</b> <b>Packer at 6842'</b>	DEPTH SET <b>446'</b> <b>7326'</b>	SACKS CEMENT <b>300</b> <b>1950</b>					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	<b>RECEIVED</b> <b>MAR 11 1974</b> <b>OIL CON. COM.</b> <b>INST. 3</b>
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	

GAS WELL

Actual Prod. Test-MCF/D <b>563</b>	Length of Test <b>3 hrs.</b>	Bbls. Condensate/MMCF <b>-0-</b>	Gravity of Condensate <b>-</b>
Testing Method (pitot, back pr.) <b>Back Pressure</b>	Tubing Pressure (shut-in) <b>Not Applicable</b>	Casing Pressure (shut-in) <b>1181</b>	Choke Size <b>.750</b>

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature)

**Area Engineer**

(Title)

**March 8, 1974**

(Date)

OIL CONSERVATION COMMISSION

**MAR 11 1974 4-29**, 19 **74**  
APPROVED  
BY **Original Signed by Emery C. Arnold**

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.

Separate Forms C-104 must be filed for each pool in multiply