Submit 5 Copies
Appropriate District Office
DISTRICT 1

State of New Mexico Energy, Minerals and Natural Resources Department

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

P.O. Box 1980, Hobbs, I	NM 88240	OII	CONSE	DVA	TIONI	TUIC	ION			at Botto	n of Page
DISTRICT II P.O. Drawer DD, Anesia	NA 88210	On	ATION DIVISION ox 2088								
DISTRICT III 1000 Rio Brazos Rd., A.			Santa Fe, N	ew Me	xico 8750)4-2088			/	į.	
1.	Zec, 1410		T FOR ALLO					ION	ř		
Operator AMOCO DEPODUC	TEOM COMBA							Well A) ()	
AMOCO PRODUC	TION COMPA	NY						300	39225690		
P.O. BOX 800		COLORADO 8	30201								
Reason(s) for Filing (CI New Well	heck proper box)	Chai	nge in Transporter	of	Ou	et (Please	explain)				
Recompletion	ñ	Oil	Dry Gas								
Change in Operator		Casinghead Gas	Condensate	<u> [X]</u>							
If change of operator giv and address of previous	operator										
II. DESCRIPTIO	N OF WELL										
JICARILLA CO	NTRACT 155				ng Formation SOUTH	(GAS)			Lease Federal or Fee		ase No.
Location Unit Letter	Н	1620) Feet From	The	FNL Lin	e and	880	Fee	et From The	FEL	Line
Section	29 Townshi	₀ 26N	Range	5₩	. N	мрм,		R10	ARRIBA		County
		*									
III. DESIGNATION Nume of Authorized Tr			ondensate			re oddress	o which a	pproved	copy of this fo	orm is to be se	น)
GARY WILLIAM Name of Authorized Tr	IS_ENERGY_C ansporter of Casing	ORPORATION							LD, NM_copy of this fo	87413 orm is to be see	น)
NORTHWEST PI	PELINE_COR	PORATION			P.O. B	0X890	O, SA	LT_LA	KE CITY	,_UT_84	108-0899
If well produces oil or t give location of tanks.	iquids,	Unit Sec.	Twp.	Rge.	la gas actuali	y connecte	d? [*]	When	7	,	
If this production is com		from any other lea	se or pool, give o	ommingli	ng order num	ber:					
IV. COMPLETIC	DN DATA	loi	Well Gas	Well	New Well	Water	. I D	ecpen	Plug Back	Sama Back	Diff Res'v
Designate Type	of Completion	- (X)	WEIL CAL	44.011	I HEW WELL	MOSTON	.	ecpen	ring Dack	Pattic Mes A	
Date Spudded		Date Compl. Re	ady to Prod.		Total Depth	1			P.B.T.D.		
Elevations (DF, RKB, R	Name of Produc	ame of Producing Formation			Top Oil/Gas Pay				Tubing Depth		
Perforations									Depth Casing	g Shoe	
	·	THE	NG, CASING	AND	CEMENTI	NO REC	OBD.				
HOLE S	ize		& TUBING SIZE		CENTRAL	DEPTH :			s	ACKS CEME	NT
N. aucom in area	NIN DEGLIE	YE FOR ALL	OWADIE								
V. TEST DATA A OIL WELL ##	EST must be after r			Ind must	be equal to or	exceed 10)	allowabl	e for this	depth or be f	or full 24 hour	s.)
Date First New Oil Run		Date of Test			Producing M						
Length of Test		Tubing Pressure			Casing Press	ure	D	E C	Chrisik	£iħ	
Actual Prod. During Te	SI.	Oil - Bbls.			Water - Bbis		M		Gal- MCF	<u>- IUI</u>	
								JUL	5 1990	<u> </u>	
GAS WELL							_0		ON D	11.	
Actual Prod. Test - MC	T/D	Length of Test			Bbis. Conder	sale/MMC	F		GAMO OF	ondensate	•.
Testing Method (pitot, b	ack pr.)	Tubing Pressure	(Shut-in)		Casing Press	ure (Shut-ii	n)		Choke Size		
VI. OPERATOR	R CERTIFIC	ATE OF CO	MPLIANC	 E					L		
I hereby certify that	the rules and regul	ations of the Oil C	Conservation		(JIL C	ONSE	:HVA	MOH	DIVISIC	N
Division have been of is true and complete					Date	a Appro	ved _		JUL	5 1990	
<u> </u>	My							7	15 6		,
Signature Doug W. W	haley, Sta	ff Admin.	Supervisor		By_			SHE	PVISOP	DISTRIC	T 43

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

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 with Rule 111.

Title

SUPERVISOR DISTRICT 13

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

Title

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 1
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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

1000 Rio Brazos Rd , Aziec, NM 87	1410 DEOLIECT	500 ALL 0111						
I.	HEQUES!	FOR ALLOWA RANSPORT C	ABLE AND AUTHO	ORIZATIO	N			
Operator AMOCO PRODUCTION CO			Well API No.					
Address					00392256900	<u> </u>		
P.O. BOX 800, DENVE Reason(s) for Filing (Check proper I	R, COLORADO 80	201						
New Well		in Transporter of:	Other (Please	explain)				
Recompletion	Oil	Dry Gas						
Change in Operator If change of operator give name	Casinghead Gas	Condensate X						
and address of previous operator								
II. DESCRIPTION OF WE Lease Name								
JICARILLA CONTRACT	155 Well N	iding Formation ACRA (GAS)		Kind of Lease Lea State, Federal or Fee		lo.		
Location H	1620		DMI	000		1		
Unit Letter	:	Feet From The _	FNL Line and	880	Feet From The	FEL.	_Line	
Section 29 Tov	vnship 26N	Range 5W	, NMPM,	R	IO ARRIBA	Co	unty	
III. DESIGNATION OF TH	RANSPORTER OF	OIL AND NATI	UDAL CAS					
Name of Authorized Transporter of C	Oil or Conc		Address (Give address	to which approv	ed copy of this form	is to be seru)		
GARY WILLIAMS ENERG Name of Authorized Transporter of C	Y_CORPORATION		P-0 BOX 159	RLOOME	TRID NM Q	7/.12		
NORTHWEST PIPELINE	***************************************	or Dry Gas X	Address (Cive data est	ю жиск арргоч	ed copy of this form	is to be seril)		
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge	P.O. BOX 890 Is gas actually connecte	d? Wh	LAKE CITY,	UT <u>84108</u> .	=0899	
f this production is commingled with	that from any other lease of	of pool, give commin-	uling order number					
V. COMPLETION DATA		n poor, give continui	Rung order antwoer:					
Designate Type of Complet	ion - (X)	eil Gas Well	New Well Workove	er Deepen	Plug Back San	ne Res'v Diff	Res'v	
Date Spudded	Date Compl. Ready	to Prod.	Total Depth		P.B.T.D.			
Charations (INC DED DE CH								
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Pay		Tubing Depth			
erforations			<u> </u>		Depth Casing Sh	oc		
	TUDING							
HOLE SIZE		UBING SIZE	CEMENTING REC		SAC	KS CEMENT		
					SACKS CEMENT			
I. TEST DATA AND REQU OIL WELL (Test must be off	JEST FOR ALLOW	ABLE						
Date First New Oil Run To Tank	Date of Test	. Ly itala bii ana misi	be equal to or exceed top Producing Method (Flow	allowable for the pump, gas lyt,	us depth or be for fu etc.)	Il 24 hours)		
ength of Test	Tubing Pressure		 			A		
	ruonig riessure		Casing Pressure	D) R 5	C.L.A.E	11		
actual Prod. During Test	Oil - Bbls.		Waler - Bbls.	<i>d</i>	5 1990	y		
GAS WELL			<u></u>	JUL				
Actual Prod. Test - MCI/D	Length of Test		Bbls. Condensate/MMCF	OIL CO	DIV. DIV	ficule		
				D		usaic.		
esting Method (pitot, back pr.)	Tubing Pressure (Shu	1-in)	Casing Pressure (Shut-in)		Choke Size			
I. OPERATOR CERTIF	ICATE OF COMI	PLIANCE	1					
I hereby certify that the rules and re	gulations of the Oil Conse	rvation	OIL CC	NSERV	ATION DIV	/ISION		
Division have been complied with a is true and complete to the best of it	no mai the information given by knowledge and belief.	en above			JUI :	5 1990		
N1/1/10.			Date Approv	/ed		1		
Signature Signature		Ву	Thank!					
Doug W. Whaley, St	aff Admin. Sup			S	UPERVISOR I	DISTRICT	#3	
June 25, 1990	303-	Title 830-4280	Title				, ·	
Date	Tele	phone No.]]					

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