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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICE II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| 1. | | TO TRA | NSPORT O | IL AND NA | TURAL G | | | | | |
|---|--|------------------|--------------------------|---------------------------------------|---|-----------------|--|--------------|-------------|--|
| Operator Amoco Production Comp | | | | | | Well API No. | | | | |
| Address | 3003907201 | | | | | | | | | |
| 1670 Broadway, P. O. | Box 800 | , Denve | r, Colora | do 8020 | 1 | | | | | |
| Reason(s) for Filing (Check proper box) | | | | Ou | ner (Please exp | lain) | | | | |
| New Well Recompletion | Oil | | Transporter of: Dry Gas | | | | | | | |
| Change in Operator | | | Condensate | | | | | | | |
| L | | | , 6162 S. | Willow | Englass. | | | | | |
| | | | , 0102 5. | WILLOW, | Englewoo | oa, <u>coro</u> | rado 80 |)155 | | |
| II. DESCRIPTION OF WELL Lease Name | | | | | | | | | | |
| SAN JUAN 28-7 UNIT | | | Pool Name, Inclu | TH (PICT CLIFFS) FEDE | | | Lasse No. RAL 49032365 | | | |
| Location | | , <u> </u> | THICO DOD | III (FICI | CLILLO | t FDF | KAL | 4903 | 2365 | |
| Unit Letter A | : 119 | 90 | Feet From The F | NL Lir | e and 1190 | Fe | et From The | FEL | Line | |
| Section 4 Townshi | _p 27N | | Range7W | N | мрм, | RIO A | RRIBA | | County | |
| III. DESIGNATION OF TRAN | SPORTEI | OF OH | I. AND NATE | IDAL GAS | | | | | | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be se | | | | | | | | | ni) | |
| Name of Authorized Transporter of Casing | Address (Give address to which approved copy of this form is to be sent) | | | | | | | | | |
| EL PASO NATURAL GAS COMPANY | | | | P. O. BOX 1492, EL PASO, TX | | | | X 79978 | | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. [| Twp. Rge | . Is gas actual | y connected? | When | 7 | | | |
| If this production is commingled with that i | from any othe | rlease orpo | ool, give comm.nj | ling order num | ber: | | | | | |
| IV. COMPLETION DATA | | | | | | | | | | |
| Designate Type of Completion | - (X) | Oit Well | Gas Well | New Well | Workover | Осерея | Plug Back | Same Res'v | Diff Res'v | |
| Date Spudded | Date Compl | Ready to F | rod. | Total Depth | L | I | P.B.T.D. | J | .L | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Deutsian Francis | | | Top Oil/Gas Pay | | | | | | |
| | | | | Top one say ray | | | Tubing Depth | | | |
| Perforations | | | | | | | Depth Casin | g Shoe | | |
| | CEMENTI | CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | | | DEPTH SET | | | SACKS CEMENT | | |
| | | | | ļ <u> </u> | | | | | | |
| | | | | | | · | | | | |
| | | | | l | | | | | | |
| V. TEST DATA AND REQUES | | | | | | | | | | |
| OH. WELL (Test must be after recovery of total volume of load oil and must Date First New Oil Run To Tank Date of Test | | | | | t be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lyfi, etc.) | | | | | |
| Length of Test | Tubing Pressure | | | Casing Pressure | | | Choke Size | | | |
| | _ | | | | | | | | | |
| Actual Prod. During Test | Oil - Bbis. | | | Water - Bbls. | Water - Bbls. | | | Gas- MCF | | |
| GAS WELL | · | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Actual Prod. Test - MCF/D | | | | | Bbls. Condensate/MMCF Gravity of Condensate | | | | | |
| | | | | • | | | And the state of t | | | |
| esting Method (pitot, back pr.) | Tubing Pressure (Shutin) | | | Casing Press. | Casing Pressure (Shut-in) | | | Choke Size | | |
| I. OPERATOR CERTIFICA | ATE OF 6 | COMPL | IANCE | 1 | | | | | | |
| I hereby certify that the rules and regulations of the Oil Conservation | | | | OIL CONSERVATION DIVISION | | | | | | |
| Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | | | MAY 0.8 1989 | | | | | | |
| and and complete to are own or my knowledge and oction. | | | | Date | Approve | a | ·- ·-· | | | |
| J. L. Hamoton | | | | But) Chang | | | | | | |
| J. L. Hampton Sr. Staff Admin, Supry | | | | By SUPERVISION DISTRICT # 3 | | | | | | |
| Printed Name | . Staff | Т | itle | Title | | | · - · | • | | |
| Janaury 16, 1989 | | 303-83 | 0-5025 one No. | Title | | | | | | |
| | | | | 11 | | | | | | |

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

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 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,