

6

DATE FILE	1
FILE	1
D.I.C.S.	
LAND OFFICE	
TRANSPORTER	OIL 3 GAS
OPERATOR	1
REGISTRATION OFFICE	

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

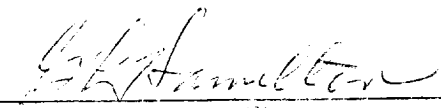
Operator AMCOO PRODUCTION COMPANY	
Address 501 Airport Drive, Farmington, New Mexico 87401	
Transporter (Check proper box) Oil ☒ Gas ☐	Notes (Please explain) Four Corners Pipeline Co. will run approx. 75%, Giant Refining, Inc. will run approx. 25%, and Plateau will purchase surplus on spot sales basis.
Transportation Casinghead Gas ☐ Dry Gas ☐ Condensate ☐	
Well name of owner to give name and address of previous owner	

Well Name Navajo Tribal "D"	Well No. 13	Pool Name, including Permit Tocito Dome Penn. "D"	Kind of Lease Federal	Lease No. 14-20-603-5034
Location Unit Letter <u>J</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u>				
Line of Section <u>16</u> Township <u>26N</u> Range <u>18W</u> , NMPM, <u>San Juan</u> County				

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Four Corners Pipeline Company Giant Refining, Inc. Plateau, Inc.					Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, New Mexico 87401 Box 256, Farmington, New Mexico 87401 Box 108, Farmington, New Mexico 87401	
Is well producing oil or liquids, give location of tanks.	Unit A	Sec. 20	Twp. 26N	Rge. 18W	Is gas actually connected?	When 4-14-73
If this production is commingled with that from any other lease or pool, give commingling order number CTB-123						

Designate Type of Completion -- (X)	Oil Well	Gas Well	New Well	Workover	Reoper	Plug Back	Same Res't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.S.T.D.		
Perforations (T.D., R.D., RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

VI. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of fluid 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 Interval (From, to, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
OLD WELLS		
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)
		Choke Size

VII. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED NOV 27 1974	
 (Signature) Area Administrative Supervisor		Original Signed by <u>Ernest C. Arnold</u> SUPERVISOR DIST. <u>30</u>	
November 25, 1974 (Date)		TITLE _____	
		This form is to be filed in accordance with N.M.C. 116.	
		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 logs taken on the well in accordance with N.M.C. 111.	
		If a portion of this form must be filled out retroactively for allowable on a well completed prior to 1965.	
		Fill out only Sections I, II, III, and VI for change of owner, well name or number, or for portion or other such change of condition.	
		Separate Forms C-104 must be filed for each pool in multiply	