

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <b>AMOCO PRODUCTION COMPANY</b>		Well API No. 3004521353
Address P.O. BOX 800, DENVER, COLORADO 80201		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/> Other (Please explain) <span style="background-color: black; color: black;">XXXXXXXXXX</span>		

If change of operator give name  
and address of previous operator \_\_\_\_\_

#### II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>GALLEGOS</b>	Well No. <b>7</b>	Pool Name, Including Formation <b>BASIN (DAKOTA)</b>	Kind of Lease <b>INDIAN</b>	Lease No. <b>1149IND7971</b>
Location Unit Letter <b>C</b> : <b>1075</b> Feet From The <b>FNL</b> Line and <b>1600</b> Feet From The <b>FWL</b> Line Section <b>34</b> Township <b>26N</b> Range <b>11W</b> , <b>NMPM</b> , <b>SAN JUAN</b> County				

#### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <b>MERIDIAN OIL INC.</b>	<input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <b>3535 EAST 30TH STREET, FARMINGTON, NM 87401</b>				
Name of Authorized Transporter of Casinghead Gas <b>SUNTERRA GAS GATHERING CO.</b>	<input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. BOX 1899, BLOOMFIELD, NM 87413</b>				
If well produces oil or liquids, give location of tanks.	Unit	Soc.	Twp.	Rge.	Is gas actually connected?	When?

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
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, 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			

#### V. TEST DATA AND REQUEST FOR ALLOWABLE

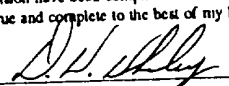
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)		
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
		<b>FEB 25 1991</b>

#### GAS WELL

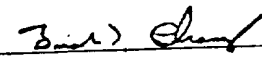
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pump, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

#### VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

  
Signature  
**Doug W. Whaley, Staff Admin. Supervisor**  
Printed Name  
February 8, 1991  
Date  
303-830-4280  
Telephone No.

#### OIL CONSERVATION DIVISION

**FEB 25 1991**  
Date Approved  
By   
Title  
**SUPERVISOR DISTRICT #3**

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

- 1) 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.

District I  
PO Box 1980, Hobbs, NM 88241-1980

District II  
811 South First, Artesia, NM 88210

District III  
1000 RioBrazos Rd., Aztec, NM 87410

District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources Department  
**OIL CONSERVATION DIVISION**  
2040 South Pacheco  
Santa Fe, NM 87505

Form C-104  
Revised October 18, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address <b>CROSS TIMBERS OPERATING COMPANY</b> 6001 Highway 64 Farmington, NM 87401		<sup>2</sup> OGRID Number 167067
		<sup>3</sup> Reason for Filing Code <i>11/1/98</i> Change of Operator <del>12/1/97</del>
<sup>4</sup> API Number 30-045-21353	<sup>5</sup> Pool Name BASIN DAKOTA	<sup>6</sup> Pool Code 71599
<sup>7</sup> Property Code	<sup>8</sup> Property Name GALLEGOS	<sup>9</sup> Well Number 7

II. <sup>10</sup> Surface Location

UL or lot no. C	Section 34	Township 26N	Range 11W	Lot.Idn	Feet from the 1075	North/South Line N	Feet from the 1600	East/West line W	County SJ
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<sup>11</sup> Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West line	County
<sup>12</sup> Lse Code N	<sup>13</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> POD	<sup>21</sup> O/G	<sup>22</sup> POD ULSTR Location and Description

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DEC 1 9 1997

IV. Produced Water

<sup>23</sup> POD	<sup>24</sup> POD ULSTR Location and Description
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OIL CON. DIV.  
DIST. 3

V. Well Completion Data

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBSD	<sup>29</sup> Perforation	<sup>30</sup> DHC,DC,MC
<sup>31</sup> Hole Size	<sup>32</sup> Casing and Tubing Size	<sup>33</sup> Depth Set	<sup>34</sup> Sacks Cement		

VI. Well Test Data

<sup>35</sup> Date New Oil	<sup>36</sup> Gas Delivery Date	<sup>37</sup> Test Date	<sup>38</sup> Test Length	<sup>39</sup> Tbg. Pressure	<sup>40</sup> Csg. Pressure
<sup>41</sup> Choke Size	<sup>42</sup> Oil	<sup>43</sup> Water	<sup>44</sup> Gas	<sup>45</sup> AOF	<sup>46</sup> Test Method

<sup>47</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>Vaughn O. Vennerberg</i>	<b>OIL CONSERVATION DIVISIO</b> Approved by: Frank T. Chavez Title: Supervisor District #3 Approval Date:
Printed Name: Vaughn O. Vennerberg, II Title: Sr. Vice President-Land Date: December 1, 1997 Phone: (505) 632-5200	

<sup>48</sup> If this is a change of operator fill in the OGRID number and name of the previous operator	Amoco Production Company	OGRID# 000778
<i>Gail Jefferson</i> Previous Operator Signature	Gail Jefferson Printed Name	Senior Administrative Staff Assistant Title
		12/01/97 Date