

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

Form O-100
Supersedes O-100 and C-1
Effective 1-1-68

LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/>
	GAS <input checked="" type="checkbox"/>
OPERATOR	
PRORATION OFFICE	

I. Operator
AMOCO PRODUCTION COMPANY
Address
501 Airport Drive Farmington, NM 87401
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Valencia Canyon Unit	7	Choza Mesa Pictured Cliffs	State, Federal or Fee Federal	NM 14924
Location				
Unit Letter	E	1700 Feet From The North	Line and 790	Feet From The West
Line of Section	36	Township 28N	Range 4W	NMPM, Rio Arriba 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)	
Plateau, Inc.	P.O. Box 108 Farmington, NM 87401	
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)	
El Paso Natural Gas Company	P.O. Box 990 Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	E	36
	28N	4W
	No	

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.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
9/26/77	11/29/77	4380'		4343'				
Elevations (DF, R&B, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
7327' GL, 7337' KB	Pictured Cliffs	4102'		4283'				
Perforations				Depth Casing Shoe				
4102-64, 4196-4256, 4262-4312				4372'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8" Casing		267'		250			
7-7/8"	4-1/2" Casing		4372'		1150			
	2-3/8" Tubing		4283'					

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1941	3 hours		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	1031 psig	1033 psig	0.75"

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.

Original Signed By
E. E. SVOBODA

(Signature)

Area Administrative Supervisor

(Title)

2/27/78

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 28 1978

Original Signed by A. R. Kendrick

BY

TITLE SUPERVISOR DIST. #1

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.

See Form O-104 must be filed for each well in compliance