

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

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

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

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

I.

Operator AMOCO PRODUCTION COMPANY	Well API No. 300392173400
Address P.O. BOX 800, DENVER, COLORADO 80201	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name SAN JUAN 28 7 UNIT	Well No. 199	Pool Name, Including Formation BASIN DAKOTA (PRORATED GAS)	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>L</u> : <u>2120</u> Feet From The <u>FSL</u> Line and <u>800</u> Feet From The <u>FWL</u> Line				
Section <u>19</u>	Township <u>28N</u>	Range <u>7W</u>	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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
MERIDIAN OIL INC.	3535 EAST 30TH STREET, EARMINGTON, NM 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 79978
If well produces oil or liquids, give location of tanks.	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

RECEIVED
AUG 23 1990

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 & be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, 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
Testing Method (pilot, 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.

D. W. Whaley
Signature
Doug W. Whaley, Staff Admin. Supervisor
Printed Name
July 5, 1990
Date
303-830-4280
Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 23 1990

By *[Signature]*

Title SUPERVISOR DISTRICT #3

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.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 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
 PO Drawer DD, Artesia, NM 88211-0719
 District III
 1000 Rio Bravo Rd., Aztec, NM 87410
 District IV
 PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
 Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
 PO Box 2088
 Santa Fe, NM 87504-2088

Form C-104
 Revised February 10, 1994
 Instructions on back
 Submit to Appropriate District Office
 5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address CONOCO INC. 10 Desta Drive Ste 100W MIDLAND, TEXAS 79705		OGRID Number 005073
		Reason for Filing Code CH (EFFECTIVE 3-1-95) CO (EFFECTIVE 4-1-95)
API Number 30-0 39-21734	Pool Name BASIN DAKOTA	Pool Code 71599
Property Code 16608	Property Name SAN JUAN 28-7 Unit	Well Number 199

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West line	County
L	19	28 N	7 W	3	2120	SOUTH	800	WEST	RIO ARRIBA

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
Lee Code	Producing Method Code	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				
F	P								

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
014538	MERIDIAN OIL INC. P.O. BOX 4289 FARMINGTON, NM. 87499	112410	O	L 19 28N 7W
007057	EL PASO NATURAL GAS CO. P.O. BOX 4990 FARMINGTON, NM 87499	112430	G	L 19 28N 7W
009018	GIANT REFINERY P.O. BOX 338 BLOOMFIELD, NM 87413	112410	O	L 19 28N 7W EFFECTIVE 4-1-95

IV. Produced Water

POD	POD ULSTR Location and Description
112450	L 19 28N 7W

V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

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FEB 17 1995
OIL CON. DIV.
DIST. 3

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

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: *Bill R. Keathly*
 Printed name: BILL R. KEATHLY
 Title: SR. REGULATORY SPEC.
 Date: 2-15-95 Phone: (915) 686-5424

OIL CONSERVATION DIVISION
 Approved by: *378*
 Title: SUPERVISOR DISTRICT #3
 Approval Date: FEB 17 1995

* If this is a change of operator fill in the OGRID number and name of the previous operator 00778

Previous Operator Signature	Printed Name	Title	Date
<i>BS Shaw</i>	Burdely Shaw	Enviro Coordinator	2/15/95