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

811 South First, Artesia, NM 88210

Form C-104

OIL CONSERVATION DIVISION

State of New Mexico Energy, Minerals & Natural Resources Department

	Revised October 18, 1994
1	Instructions on back
Submit to	Appropriate District Office
	5 Copies

District III 1000 Rio Brazo	s Rd., Azie	c. NM 87410		2040	South P Fe, NM		DION	Suc	mic to Aj	րիւօրո	5 Cop.	
District IV 2040 South Pac	heco, Sunti	. Fe, NM 875	05	Juitti	, 11111	0,505] лмі	ENDED REPOI	
I.			ST FOR A	LLOWABI	LE AND	AUTHO	RIZAT	г от иог	RANS	PORT	•	
Operator name and Address									¹ OGRID Number			
Amoco Production Company P.O. Box 800								000778				
Denver, ÇO 80201						NW				1 Reason for Filing Code		
	Al'I Number	,			3 Paul	Name		IVW				
30 - 0 39	-25534		Blanco	³ Pool Name Blanco Mesaverde				* Pool Code 75319				
	roperty Cod	c				ty Nume			' Well Number			
1191				a Canyon I	Unit			40A				
I. 10 S	Surface	Location		·							······································	
		•		Lot.ldn	Feet from the			Ì	East/W	i	County	
0	35 Bottom	Hole Lo	4W		970	Sou	ith	1660	East		San Juan	
UL or lot no.	H. or lot no. Section Township			······································			South line	Feet from the	e East/West line County			
							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1000 11000 1000	Easton	est tine	County	
12 Lac Code	13 Produc	ing Method (Code 14 Gas	Connection Date	15 C-129	Permit Numbe	r '	C-129 Effective	Dute	" C-1	129 Expiration Date	
F											,	
I. Oil a			·									
" Transpot OGRID	1er		** Transporter Name and Address			" POD " O/G			22 POD ULSTR Location and Description			
900	/ S Gé	ery-Will	liams Ene	rgy	281	6500	0	CH 9-1	4 9-15-95			
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7. Produ	iced Wa	 ilei			. I		11111		. –	.u 	: .J. J, .	
n 1	do				lol a	O ULSTR Loca	tion and I	Description		(66)	No DOV.	
	650									العاق	. 3	
. Well (Complet								·			
	B Spud Date		Ready Date 1/17/95		บ	n PBTD		2º Perforations 5968-6498		" DIIC, DC,MC		
	8/27/95 1			17/95 6696		6557						
12.25 ¹¹							·			Cement		
7.875"		8.625" 5.500"			87' 4481'			60 sx Class B				
4.75"					<u></u>		i i	650 sx Class B				
4.73		2.875"			6675			210 sx	Clas	s B		
I. Well	Test Da	ıta	1.25	b" tubing	<u> </u>	6432'						
3 Date No			Octivery Date	²⁷ Test D	Pate	" Test Le	ngth	21 Th D			H Co D	
			11/12,		2/95	24 hrs		" Thg. Pressure		" Cag. Pressure 175		
41 Choke	Size	⁴¹ Oil		Oil Water		4 Gus		" AOF		-	Test Method	
32/64			0 64			800					F	
I hereby certify ith and that the	y that the ru information	les of the Oil	Conservation Div	ision have been ed etc to the best of a	omplied	. 0	u	10000				
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ignature: Patty Haelole					امار	roved by:		4) «			
inted name: Patty laefele					Title	:	SUF	PERVISOR		RICT :	 #3	
nle: Staff Assistant					Δpp	Approval Date:						
ate: Nov. 30, 1995 Phone: (303) 830-4988						DEC - 6 1995						
			ie OGRID numl	oer and name of t		perator						
	Province O	barnin- St	utus		- 							
	r revious O	perator Signi	uture ·		r	rinted Name			Title	:	Dute	

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes. other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

- 1. Operator's name and address
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator (Include the effective date.)

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include volume requested)

If for any other reason write that reason in this box If for any other reason write that reason in this box.

- The API number of this well 4.
- 5. The name of the pool for this completion
- 6. The pool code for this pool
- 7. The property code for this completion
- 8. The property name (well name) for this completion
- 9. The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:

Federal State Fee

SP

Jicarilla Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table:

F Flowing
P Pumping or other artificial lift 13.

- MO/DA/YR that this completion was first connected to a gas transporter 14.
- The permit number from the District approved C-129 for this completion 15.
- MO/DA/YR of the C-129 approval for this completion 16.
- MO/DA/YR of the expiration of C-129 approval for this 17. completion
- 18. The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- Product code from the following table:
 O Oil
 G Gas 21.

Gas

- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.) 22.
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 23.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank" at a 1 24.
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD If openhole 29.
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore. 30.

- 31. Inside diameter of the well hore
- 32 Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and
- 34. Number of sacks of cement used per casing string

If the following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

- 35. MO/DA/YR that new oil was first produced
- 36. MO/DA/YR that gas was first produced into a pipeline
- 37 MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-In tubing pressure gas wells 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 41. Diameter of the choke used in the test
- 42 Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44. MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- The method used to test the well:
 F Flowing
 P Pumping
 S Swabbing 46.

If other method please write it in.

- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report 47.
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 48.