Subnut 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

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

1000 Rio Brazos Rd., Aziec, NM 8	REQUEST F	OR ALLOWA	BLE AND AUTHO	RIZATION			
<u>].</u>	TO TR	ANSPORT OI	_ AND NATURAL		The No.		
Operator AMOCO PRODUCTION C		Weil API No. 300450673000					
Address P.O. BOX 800, DENV	ER, COLORADO 802	201					
Reason(s) for Filing (Check proper			Other (Please	explain)			
New Well	· · ·	in Transporter of:					
Recompletion	Oil L Casinghead Gas	Dry Gas Condensate X					
If change of operator give name			 				
and address of previous operator THE DESCRIPTION OF W	ELL AND LEACE						
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including			ing Formation				
CHARLEY HOSH	1				State, Federal or Fee		
Unit LetterB	:990	Feet From The	FNL Line and	1750 Fe	et From The	FEL. Line	
Section 12 T	ownship 27N	Range 13W	, NMPM,	SAN	JUAN	County	
III. DESIGNATION OF T	RANSPORTER OF	DIL AND NATU	RAL GAS				
Name of Authorized Transporter of	·		Address (Give address	to which approved	copy of this form	is to be sent)	
MERIDIAN OIL INC. Name of Authorized Transporter of	Casinghead Gas	or Dry Gas [X]	3535 EAST 30	TH STREET	FARMINGTO	ON, CO - 87401 us ud be senu)	
EL PASO NATURAL GA		· LGJ	İ				
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge.	Is gas actually connected	The Men	(A) 10 133	, 0	
If this production is commingled wi	th that from any other lease of	r pool, give commine	ling order number:				
IV. COMPLETION DATA	~						
Designate Type of Compl	etion - (X)	II Gas Well	New Well Workov	er Deepen	Plug Back San	ne Res'v Diff Res'v	
Date Spudded	Date Compl. Ready	to Prod.	Total Depth		P.B.T.D.	l	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay Tubing Depth				
Perforations					Depth Casing Sh	Depth Casing Shoe	
	TUBING	, CASING AND	CEMENTING REC	ORD	<u> </u>		
HOLE SIZE CASING & TUBING			DEPTH SET		SAC	KS CEMENT	
T TOPO OF IN 1974 AND IN IN	OTHER FOR ALL ON	ZADI E					
V. TEST DATA AND REC	QUEST FOR ALLOY after recovery of total volum		i be equal to or exceed to	o allowable for this	depth or be for fi	ull 24 hours.)	
Date First New Oil Run To Tank	Producing Method (Flo						
Length of Test	Tubing Pressure	Tubing Pressure		س الدار	Chinke hiz	וח	
Actual Prod. During Test	Oil - Hbls.	Oil - Bbls.			Gas- MCF	<u> </u>	
				JU	2 1990		
GAS WELL				(CON DI	V.1	
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMC	k	DIST. 3	city del	
l'esting Method (pitot, back pr.)	Tubing Pressure (Sl	Tubing Pressure (Shut-in)		h)	Choke Size		
VI. OPERATOR CERT		PLIANCE	1		1	•	
Thereby certify that the rules an			OIL C	ONSERV	ATION DI	VISION	
Division have been complied wi is true and complete to the best		iven above		. 1616	2 1990		
due and complete to the test	/ my knowledge and belief.		Date Appro	ovedU	~ 1330		
_ L.H. III.	B. 7 . A /						
Signature Doug W. Whaley,	Staff Admin. Su	pervisor	By		Thomp		
Printed Name		Title	Title	SUPERVIS	OR DISTRIC	CT #3	
June 25, 1990		-830-4280					

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.
- 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.