OIL CONSERVATION DIVISION

P. O. BOX 2088

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LAND OFFICE				
TRANSPORTER	OIL			
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OPERATOR				
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REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Amoco Production Company 501 Airport Drive, Farmington, NM 87401 Resson(s) for filing (Check proper box) Other (Please explain) \square New Well Change in Transporter of: Recompletion Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Legge No. J. F. Day D IE State, Federal or Fee Basin Dakota Federal SF-047039 Location South Line and __ 830 East Unit Letter Feet From The-Feet From The 20 28N WOI San Juan Township Range , NMPM. Line of Section County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Plateau Incorporated
Name of Authorized Transporter of Casinghead Gas 26251, Albuquerque, NM 87125
address to which approved copy of this form is to be sent) or Dry Gas [X] P.O. Box 1899, Bloomfield, NM 87413 Southern Union Gathering Company Trwp. Unit Sec. Is gas actually connected? When If well produces oil or liquids, give location of tanks. 20 28N : No If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Workover Deepen Same Res'v. Diff. Res'v. Oil Well Gas Well New Well Plug Back Designate Type of Completion - (X) Х Date Compl. Ready to Prod. Total Depth Date Spudded P.B.T.D. 9-24-80 8-29-81 6824 <u>6785</u> Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oll/Gas Pay 6100' G.L. 6552 Basin Dakota 6687 Perforations Depth Casing Shoe 6552-6560', 6610-6658', 6686-6894 68241 TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE DEPTH SET SACKS CEMENT HOLE SIZE T2-1/4" 309**'** 8-5/8" 315 SX 5-1/2" 7-7/8" 68241 1780 SX 2-1/16" 6687**'** (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) Y. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Length of Test Cusing Pressure Tubing Pressure Water - Bbls. Oil-Bbls. Actual Prod. During Test OCT 19 1981 **GAS WELL** COM Actual Prod. Test-MCF/D Length of Test Bbis. Condensate/MMCF DIST 902 3 hrs. Cosing Pressure (Shut-in) Testing Method (pirot, back pr.) Tubing Preseure (Shut-in) 75" 700 psig back pressure - psig OIL CONSERVATION DIVISION VI. CERTIFICATE OF COMPLIANCE **CT** 21 1981 APPROVED_ 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 bellef. Original Signed by FRANK T. CHAVEZ BY_ SUPERVISOR DISTRICT # 3 TITLE ___ This form is to be filed in compliance with RULE 1104. Original Signed By If this is a request for allowable for a newly drilled or despende well, this form must be accomparied by a tabulation of the deviation tests taken on the well in accordance with RULZ 111. E. E. SVOBODA/baf District Administrative Supervisor All sections of this form must be filled out completely for allowable on new and recompleted walls.

Fill out only Sections I. H. III, and VI for changes of owner, included in transportance other such change of candition. Repair of the Calife must be filed for such most receiving

OCT"1'6 1981