STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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THANSPORTER	OIL	L	
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OPERATON			
PROBATION OF	HC C	1	

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Separate Forms C-104 must be filed for each pool in multip;; completed wells.

Form C-104 Revised 10-01-78 Formal 05-01 83

REQUEST FOR ALLOWABLE

OPERATOR GAL OPERATOR	AUTHOR	REQUEST FOR AN IZATION TO TRANSP	1D	OH COM D	
Operator Amoco Production Co.					
Address					
501 Airport Drive, F	arming	gton, N.M. 87	401		
Reason(s) for filing (Check proper box) X New Well Recompletion Change in Ownership	011	7	Other (Please y Gon ndensate	explain)	
If change of ownership give name and address of previous owner					
H. DESCRIPTION OF WELL AND L.	Well No.	Pool Name, Including Fo	ormation	Kind of Lease	Lease No.
Kutz Federal C	1	Otero Chac		State, Federal or Fee Feder	sal SF-0773
Unit Letter G: 1850	_Feat Fro	m The North Line		Feet From The East San Juan	County
Name of Authorized Transporter of Cit Permilan Corporation Name of Authorized Transporter of Cuting: Cas Company of New Unwell produces of or figures, Unserve Incompany of transporter of Cuting:	or C	ondensate () or Dry Gas () O Twp. Rge.	P.O. Box 17	to which approved copy of this for 02. Farming on. No to which approved copy of this for 99. Bloomfield. No	S7199
If this production is commingled with th	at from e	ny other lease or pool,	give commingling orde	er number:	
NOTE: Complete Parts IV and V or VI. CERTIFICATE OF COMPLIANCE thereby certify that the rules and regulations of been complied with and that the information gi	reverse:	onservation Division have	OIL (CONSERVATION DIVISION (1903) 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
my knowledge and belief.			BY	SUPERVISOR D	JISTRICT 雅 3
Adm. Supervisor November 8, 1985			If this is a recovered, this form multi- tests taken on the All sections of able on new and re	o be filed in compliance with quest for allowable for a newly at be accompanied by a tabula well in accordance with RUL of this form must be filled out a scompleted wells.	RULE 1104. y drilled or deepenrition of the deviction. E 111. completely for allowing the changes of owner.
(Date)			Fill out only well name or number	er, or transporter, or other such	change of condition

Designate Type of Compl	etion = (X)	OII Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v. Diff. Rei
Date Epudded 3-10-85	Date Compi.	Ready to P 3-25-8	, X rod. 5	Total Depti	3109	1	P.B.T.D.	1
Elevations (DF, RKB, RT, GR, etc	, Name of Pro	duates E						3068'
5848' GR	1	icra	αιιου	Top Oll/Go	·		Tubing Dep	oth
Perforations	Cira	icia		<u> </u>	2878	'		3103'
2878'-3010'							Depth Cast	ng Shoe
		TUBING, C	ASING, AND	CEMENTIN	NG RECORD			
HOLE SIZE	CASIN	G & TUBIA	IG SIZE		DEPTH SET			ACKS CENENT
12 1/4"		24#,		1	306'			u. it.
7 7/8"	4 1/2"	10.5#	K-55		3109'			u. ft.
				 				14 . 1 .
	2 3/8"				3013'			
7. TEST DATA AND REQUES OIL WELL Date First New Oil Run To Tanks		VABLE (T	est must be af le for this de		f total volume			qual to or exceed to; aci.
Jate First New Oil Run To Tanks	T FOR ALLOW	VABLE (To	tet must be af le for this de	Producing M	f total volume ull 24 hours) sthod (Flow, ;		(t. 41c.)	qual to or exceed to; ail
odie First New Oil Run To Tanks	T FOR ALLOW	VABLE (To	tet muet be af le for this de		f total volume ull 24 hours) sthod (Flow, ;			qual to or exceed to; ail
Pate First New Oil Run To Tanks	T FOR ALLOW	VABLE (To	set must be af le for this de	Producing M	f total volume ull 24 hours) sthod (Flow, ;		(t. 41c.)	qual to or exceed to; ail
C. TEST DATA AND REQUES OIL WELL Date First New Oil Run To Tanks ength of Test citual Prod. During Test AS WELL	T FOR ALLOW	VABLE (To	tet must be af le for this de	Producing Me	f total volume ull 24 hours) sthod (Flow, ;		Choke Sire	qual to or exceed to; sil.
ength of Test studie Prod. During Test	T FOR ALLOW	WABLE (To ab		Producing MacCasing Press Water-Bbis.	f total volume all 24 hours) sthod (Flow, ;		Choke Size Gas-MOF	
ength of Test orusi Prod. During Test AS WELL crusi Prod. Test-MCF/D	T FOR ALLOW Date of Test Tubing Press Oil-Bbls.	WABLE (To ab		Producing Me	f total volume all 24 hours) sthod (Flow, ;		Choke Sire	
ength of Test stual Prod. During Test AS WELL.	T FOR ALLOW Date of Test Tubing Press Oil-Bbls.	WABLE (To ab		Producing Mic Casing Press Water-Bbis.	f total volume all 24 hours) sthod (Flow, ;	oump, gas lij	Choke Size Gas-MOF	