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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Anesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT, III

Santa Fe, New Mexico 87504-2088

XXX Rio Brazus Rd , Aztec, NM 87410	HEUUE	ST FOR	ALLOWAB SPORT OIL	LE AND A	NUTHORI TURAL GA	ZATION AS		_		
perator	-	Well API No.								
Amoco Production Company					300452772130045227					
ddress 1670 Broadway, P. O.	Box 800,	Denver	, Colorado	80201						
cason(s) for Filing (Check proper box)				Othe	t (Please expl	ain)				
ew Well	Oil	Thange in Tra	. ()							
ecompletion () hange in Operator ()			ondensate [
change of operator give name			6162 S.	Willow,	Englewoo	d, Colo	rado 80	155		
a socies to previous operates										
. DESCRIPTION OF WELL case Name	ng Formation			Lease No.						
HUGHES A LS	3A BLANCO (MES				AVERDE) FEDEF			AL SF078049		
ncation	904		ro	T Tall	1706	ichi		ERT EW		
Unit Letter	: .80 0	10/0 F	ed From The E8	LPNL Lin	and	1800 Fe	et From The	1007.4	Lin	
Section 27 Township 29N Range 8W				, NMPM, SAN JI			JAN County			
				D. I. (14.5						
I. DESIGNATION OF TRA		OF OIL or Condensat		Address (Giv	e address to w	hich approved	copy of this j	orm is to be se	ni)	
ame of Authorized Transporter of Oil or Condensate X				P. O. BOX 1429, BLOOMFIELD, NM 87413						
lame of Authorized Transporter of Casinghead Gas or Dry Gas [X]							form is to be se	ni)		
	PASO NATURAL GAS COMPANY			P. O. BOX 1492, EL PASO Is gas actually connected? When						
f well produces oil or liquids, ive location of tanks.	Unit	S∞. T	wp. Age.	is gas access	y comeacu.					
this production is commingled with the	at from any other	r lease or po	ol, give comming	ling order num	ber:					
V. COMPLETION DATA		C	- ₁	1	Workover	Deepen	Plug Back	Same Res'v	Diff Res's	
Designate Type of Completic	on - (X)	Oil Well	Gas Well 	New Well	WOIKOVEI	Deepen	Ting track	1	Ĺ	
Date Speedded	Date Compl	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
				Top Oil/Gas	Day		The Dec			
levations (DF, RKB, RF, GR, etc.) Name of Producing Formation				TOP OIL OAS	,			Tubing Depth		
forations				1			Depth Casing Shoe			
							<u> </u>			
		TUBING, CASING AND						SACKS CEMENT		
HOLE SIZE	CAS	CASING & TUBING SIZE		DEPTH SET			Diviso Dement			
		TEAUTI	ni P	1			J			
TEST DATA AND REQU OIL WELL (Test must be after	EST FOR A	LLUWAI	BLE. Tood oil and mus	i he equal to o	r exceed top a	llowable for th	is depth or be	for full 24 ho	ws.)	
Date First New Oil Run To Tank	is he equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lýl, etc.)									
				ļ <u>. </u>			Choke Size			
Length of Test	Tubing Pres	Tubing Pressure		Casing Pressure						
Actual Prod During Test	Oil - Bbls.	Oil - Bbls.		Water - Bbls.			Gas- MCF			
				.]						
GAS WELL										
Actual Prod. Test - MCF/D	Length of	l'est		Bbls. Conde	nsate/MMCF		1 .	Condensate		
	Tubing Pressure (Shut in)			Casing Pressure (Shut-in)				Choke Size		
esting Method (pitot, back pr.)	Toomg Tie	Tubing Pressure (Snot-in)			Comme ()					
VI. OPERATOR CERTIF	ICATE OF	СОМРІ	JANCE	1			/ATION	DIVIO	7N!	
I hereby certify that the rules and re	egulations of the	Oil Conscrva	tio n		OIL CO	N2FH/	AHON	DIVISI	JIN	
Division have been complied with a is true and complete to the best of the bes	and that the infor	mation given	above	_			MAY 08	1989		
is true and complete to the pest of t	ny knowkoge at	, ocner.		Dat	e Approv	ed	MMI VO	1.)(1.) A _		
U. J. Has	Du Bul Chang									
Signature	0 0 0	C A 3 '	C	By_		CHDEDI	ITSION D	ISTRICT	# 3	
J. L. Hampton Printed Name	Sr. Staf		Title	Title	3	SUPERI				
Janaury 16, 1989			30-5025 hone No.	''''						
Date		reich	HENC IND.	11						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) 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.