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Appropriate District Office
DISTRICT J
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 Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT II P.O. Drawer DD, Anesia, NM 88210 <u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, Nivî - 87410

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

[	ТО	TRANSF	PORT OIL	AND NA	TURAL G						
The state of the s							VPI No.				
Amoco Production Company 3004								- <del>-</del>			
1670 Broadway, P.	D. Box 800, E	enver,	Colorad	o 80201							
Reason(s) for Filing (Check proper I				Othe	t (Please expl	ain)					
New Well	Cha Oil	nge in Trans									
Change in Operator	Casinghead Ga	,									
If change of operator give name and address of previous operator	Tenneco Oíl E	& P, 6	5162 S.	Willow,	Englewoo	d, Colo	rado 80	155			
II. DESCRIPTION OF WI	CLL AND LEASE					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Lease Name	ng Formation			Lease No.							
WILCH	2	2 BASIN (DAKO			TA) FEDE			RAL SF078416A			
Location B	. 960	_	FN	п	. 1730	_		FFI			
Unit LetterD	:	Feet	From The <u>FN</u>	Line	and 1730	Fe	et From The .	X D.D.	Line		
Section 25 To	waship 29N	Rang	e8W	, NA	IPM,	SAN J	UAN		County		
III DESIGNATION OF T	RANSPORTER C	OF OH. A	ND NATU	RAL GAS							
	II. DESIGNATION OF TRANSPORTER OF OIL AND NATUI					Address (Give address to which approved copy of this form is to be sent)					
CONOCO				P. O. BOX 1429, BLOOMFIELD, NM 87413							
Name of Authorized Transporter of		or Dr	y Gas [X]	l .				orm is to be se	nt)		
EL PASO NATURAL GAS If well produces oil or liquids,				le gas actually		EL PASO	, <u>TX _79978</u> ?				
give location of tanks.	ii	i	_i			i					
If this production is commingled with		ase or pool, g	give comming	ing order numb	ег:						
IV. COMPLETION DATA		l Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Comple	tion - (X)	i		i i		<u>i</u>	j <sub></sub>	i	<u>i</u>		
Date Spudded	Date Compl. Re	ady to Prod.		Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Produc	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations							Depth Casing Shoe				
							ļ				
				CEMENTIN							
HOLE SIZE	CASINO	& TUBING	SIZE		DEPTH SET			SACKS CEM	:N1		
V. TEST DATA AND REG	SHEET EAD ALL	OWADIT	Ē	l			1				
	after recovery of total v			be equal to or	exceed top all	omable for thi	s depth or be	for full 24 how	rs.)		
te First New Oil Run To Tank Date of Test				Producing Method (Flow, pump, gas lift, etc.)							
runda ar maa	2. 1				Casing Pressure			Choke Size			
Length of Test	luoing itessure	Tubing Pressure			Casing riessure						
Actual Prod. Duning Test	Oil - Bbls.	Oil - Bbls.			Water - Bbls.			Gas- MCF			
				l			1				
GAS WELL	TT: TTHE CONVICENCE.			18607:122	- AND CO		Telegrania 200	'cadanesta			
Actual Prod. Test - MCF/D	Length of Test			Bbls, Conden	SALE/MINICI		Gravity of C	,			
Testing Method (pilot, back or.)	Tubing Pressure	(Shut in)		Casing Pressu	re (Shut-in)		Choke Size				
M Chin Arch Canga	FIGATE OF G	>> 4Dt 14	NCC	\r			1				
VI. OPERATOR CERTI  Thereby certify that the rules and	-			(	DIL CON	NSERV.	NOITA	DIVISIO	N		
Division have been complied will is true and complete to the best of	h and that the informati	on given abo		Date	Anne	.d N	1AY 08	lond			
On I Ham stand				Date Approved							
Supriure J. a lamp lan				By SUPERVISION DISTRICT #3							
J. L. Hampton Sr. Staff Admin. Suprv. Finited Name Title						DUPERV)	STON DI	A LULALG			
January 16, 1989 303-830-5025				Title.							
Date		Telephone	No.	<u> </u>							
INSTRUCTIONS: This	form is to be file	Lin compl	iance 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.