		3	
DISTRIBUTION		l	
SANTA FE		1	
f LE		1	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	L	
0.05.04.7.00			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-11(

f LE	REQUEST	AND	Effective 1-1-65	
	AUTHORIZATION TO TRA	AND NEDODT OU AND MATURAL (7.A.C	
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (JAJ	
OIL I				
TRANSPORTER GAS /				
OPERATOR /				
PRORATION OFFICE				
Operator AMOCO PRODUCTION	COMPANY.			
	OOIR ANI		·	
Address 501 Airport Drive	, Farmington, New Mexico	87401		
		Other (Please explain)		
Reason(s) for filing (Check proper box) New Well	Change in Transporter of:	Office (1 tease explains)		
Recompletion	Oil Dry Gas	s		
Change in Ownership	Casinghead Gas Conden	sate		
If change of ownership give name and address of previous owner				
and address of provious owner				
DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including Fo	ormation Kind of Leas	se Lease No	
Lease Name Lobato Gas Com "A"	1A Blanco Mesave			
Location	IA DIGILO MESEVE	106		
D 11	80 North	e and Feet From	The West	
Unit Letter;	Feet From TheLin	e drid i eet i ion	The	
Line of Section 3	wnship 29-N Range	9-W , NMPM, Sa	n Juan County	
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	Address (Give address to which appro	oved conv of this form is to be sent)	
Name of Authorized Transporter of Oil Plateau, Inc.	or Condensate		ton, New Mexico 87401	
Name of Authorized Transporter of Car	singhead Gas or Dry Gas	Address (Give address to which appro		
Kl Paso Natural Gas Co	mpany	1	ton, New Mexico 87401	
	Unit Sec. Twp. P.ge.	<u> </u>	hen	
If well produces oil or liquids, give location of tanks.	D 3 29N 9W	No	Approx. 60 days	
Designate Type of Completion	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.	
2-11-77	3-10-77	4830 * Top C:1/Gas Pay	4774 Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.) 5602 GL	Name of Producing Formation Messverde	3868 °	45821	
Perforations 3868-3902, 391	0-80, 4000-42, 4101, 418	2-90, 4228-34, 4302-16,	Depth Casing Shoe	
4330-36, 4455-58, 4469-	72, 4476-96, 4506-38, 45	52-62, 4576-84 x 1 SPF	4830 *	
		D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	257 T	SACKS CEMENT	
12-1/4"	9-5/8"	2650	280 510	
8-3/4" 6-1/4"	4-1/2**	2449-4830	310	
0-1/4	4-1/2	2443 4030		
The second of th	COR ALLOWARIE (Test must be a	offer recovery of total volume of load of	il and must be equal to or exceed top all	
. TEST DATA AND REQUEST F	able for this de	epth or be for full 24 hours)		
Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	upt, etc.)	
		Contra Programme	Choke Size	
Length of Test	Tubing Pressure	Casing Pressure	1 3 T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Pool Dool Dool Tool	Oil-Bbls.	Water - Bbls.	Gas-MCF	
Actual Prod. During Test			Gde - MCF	
			100 1.3	
GAS WELL			- No. 1	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
1756	3 hr.		Challes Size	
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 491	Casing Pressure (Shut-in) 500	Choke Size	
. CERTIFICATE OF COMPLIAN	ICE	WAR I	ATION COMMISSION	
فللم علماني بالمراجعين والمراجع المراجع	regulations of the Oil Conservation	APPROVED	, 19	
Commission have been complied	with and that the information given	OBIGHTS (2012) (2013) (2013)	E MAXWELL, JR.	
above is true and complete to the best of my knowledge and belief.		BY ORIGINAL SEASO DY R. R. MAXWELL, JR. PRYNOLINGS RIGHTERYS DILLE 70. 5		
		(1) よりは、 (1) は、 (1)	. 1	
		TITLE		
2 3		This form is to be filed in	n compliance with RULE 1104.	
It Swolada		TITLE This form is to be filed in	n compliance with RULE 1104.	
Elsvoboda (Sig	nature)	TITLE This form is to be filed in	n compliance with RULE 1104. owable for a newly drilled or deeps	

(Title)

(Date)

March 24, 1977

All sections of this form must be filled out completely for able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.