

DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS 1
OPERATOR	1
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator Amoco Production Company	
Address 501 Airport Drive, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name A. L. Elliott "B"	Well No. 1A	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease Federal	Lease No. 8F-078132
Location				
Unit Letter F ; 1770 Feet From The North Line and 1850 Feet From The West				
Line of Section 10 Township 29-N Range 9-W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Plateau, Inc.	P. O. Box 108, Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P. O. Box 990, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 10	Twp. 29-N	Rge. 9-W	Is gas actually connected? No	When Approximately 60 Days

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		X	X					
Date Spudded 3-2-77	Date Compl. Ready to Prod. 3-30-77		Total Depth 5075'		P.B.T.D. 5015'			
Elevations (DF, RKB, RT, GR, etc.) 5960' GL	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 4202'		Tubing Depth 4948'			
Perforations 4202-06', 4212-58', 4262-68', 4271-76', 4293-4301', 4320-64', 4392-98', 4425', 4468', 4480-85', 4487', 4497', 4501-21', 4525', over					Depth Casing Shoe 5075'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8" csg.		268'		280 sx			
8-3/4"	7" csg.		2950'		625 sx			
6-1/4"	4-1/2" liner		2762-5075'		275 sx			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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)


Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

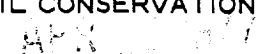
Actual Prod. Test-MCF/D 1769	Length of Test 3 Hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 470	Casing Pressure (shut-in) 568	Choke Size .750

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Area Adm. Supvr.
(Title)
April 11, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED  , 19____
BY **Original Signed by R. Hendrick**
SUZANNE
TITLE _____

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable 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.
Supersedes Form C-104 must be filed for each well in multiple

4557-68', 4594', 4603-22', 4632', 4650-56', 4663', 4760', 4793', 4797', 4805', 4812-31',
4840-48', 4854', 4868-83', 4885-96', 4903', 4908-12', 4920-24', x 4929'