	DISTRIBUTION S	- 1		/	
	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and (Effective 1-1-65		
	L S.C.S.	AUTHORIZATION TO TE	AND RAMSPORT OIL AND NATURAL	GAS 10	
	TRANSPORTER OIL GAS (
	CPERATOR				
1	Operation Office Operator				
	Amoco Production Company				
	501 Airport Drive, Farmington, NM 87401				
	Recson(s) for filing (Check proper box) New Well XX Change is Transcential				
	Recompletion	Change in Transporter of: Oil Dry (Gas		
	Change in Ownership	Casinghead Gas Cond	lensate		
	If change of ownership give name and address of previous owner				
11	. DESCRIPTION OF WELL AND LEASE				
	A. L. Elliott "D"	Vell No. Pool Name, Including 2A Blanco Mes	Formation Kind of Lease	Federal Lease No	
	Location		State, reder	SF07813	
	Unit Letter J : 1800 Feet From The South Line and 1500 Feet From The East				
	Line of Section 11 To	ownship 29-N Range	9-W , _{NMPM} , San	Juan County	
HI	. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil				
	Plateau, Inc. P. O. Box 108. Farmington NM 87/01				
	Name of Authorized Transporter of Co.		Address (Give address to which approved copy of this form is to be sent)		
	El Paso Natural Gas Company P. O. Box 990, Farmington, NM 87401 If well produces oil or liquids, Unit Sec. Twp. Fige. Is gas actually connected? When				
	give location of tanks. J 11 29N 9W No Approx. 60 Days				
IV.	If this production is commingled with that from any other lease or pool, give commingling order number: - COMPLETION DATA				
	Designate Type of Completi		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'	
	Date Spudaed 3-9-77	Date Compl. Ready to Prod. 4-7-77	Total Depth 5075*	P.B.T.D. 5039	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Froducing Formation	Top Oll/Gas Pay	Tubing Depth	
	5925 GL	Mesaverde	/0/6 501 /060 701	4964* Depth Casing Shoe	
	4282-4305', 4440-46', 4456-71', 4504-12', 4574-85', 4684-90', over				
	HOLE SIZE	TUBING, CASING, AN	D CEMENTING RECORD DEPTH SET		
	12-1/4"	9-5/8"	278'	SACKS CEMENT 280 SX	
	8-3/4" 6-1/4"	7" 4-1/2"	2945 ' 2734-5075 '	625 sx	
				275 sx	
V.	OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	t, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bhis.	Water-Bbla.	Gas-MCF	
-	GAS WELL		1 12 12 1		
	Actual Prod. Test-MCF/D 2820	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Back Pressure	575	616	.75	
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED, 19		
	above is true and complete to the best of my knowledge and belief.		By Original Signed by A. R. Yendrick		
	and the second s		TITLE		
	Elfrobola		This form is to be filed in co	This form is to be filed in compliance with RULE 1104.	
-	(Signature)		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		

Area Adm. Supvr.

(Title) April 12, 1977

(Date)

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.