			, 5	, , — ,			
	DISTRIBUTION	NO					
	SANTA FE		1				
	i LE				_		
	L.S.G.S.						
	LAND OFFICE						
	TRANSPORTER	OIL	1				
		G A S	1				
	OPERATOR		1				
1.	PRORATION OFFICE						
	Operat AMOCO PRODUCTION COM						
	Addres 501 AIRPORT DRIVE, FA						
	Reason(s) for filing (Check proper box)						
	New Well						
	Recompletion						

SANTA FE /	REQUEST FOR ALLOWARIE		Form C-104 Supersedes Old C-104 and C-					
L.S.G.S.	AUT. (05) 7 . T. (0) . T. (0)	AND						
LAND OFFICE	AUTHORIZATION TO TI	RANSPORT OIL AND NATURA	L GAS					
TRANSPORTER OIL /								
OPERATOR /								
1. PRORATION OFFICE								
Operata MOCO PRODUCTION (	COMPANY							
	Addre 501 AIRPORT DRIVE, FARMINGTON, NM 87401							
L								
Reason(s) for filing (Greck proper be	Ox)  Change in Transporter of:	Other (Please explain)						
Recompletion	Oil Dry	Gas						
Change in Ownership		lensate						
If change of ownership give name and address of previous owner								
II. DESCRIPTION OF WELL AND	LEASE							
LaselNamelLIOTT "C"	Well No. Pool Name, Including Blanco Mes a	Formation Kind of Le  Verde State Fed	Lease No. SF078132					
Location E 1	470' North	1030 *						
Unit Letter	Feet From The	ine and Feet Fro	west The					
	29-N cwnship Range	9-W San	Juan County					
III. DESIGNATION OF TRANSPOR	RTER OF OUL AND NAMED DATE	AC						
Fireteamhorific ransporter of O	or Condensate	Address (Give address to which app	proved copy of this form is to be sent)  87401					
BiroPas of Wathfafruss of	or Dry Gas or Dry Gas		proved copy of this form is to be sent)  gton, NM 87401					
If well produces oil or liquids, give location of tanks.	E" 15 29N 9W	<u> </u>	When					
	ith that from any other lease or pool	give commingling order number:						
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty Diff Resty					
Designate Type of Completi	ion – (X)	x	Plug Back   Same Restv. Diff. Restv.					
10/21/97	Date Gary 3/77 to Prod.	Total Depth 4970*	P.B.T.D. 4945'					
3973 ans CEF, 3986 F, RB, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4068-74, 4144-5	0,4208-14,4234-40,4249-7	O 4074 4004 4400 04 44	4842 Depth Casing Shoe					
4772-4826,4831-41,4850-	-4500,4505-08,4511-16,45		4970'					
13-4748 SIZE		D CEMENTING RECORD	54.045.051.51.5					
8-3/A"	CASING A THEMS SIZE	268 DEPTH SET	SACKS CEMENT					
6-1/4"	7" csg.	2898'	600					
	4-1/2" csg. 2-3/8" tbg.	2711-4970* 4842*	200					
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	<u> </u>	il and must be equal to or exceed top allow-					
OIL WELL	able for this d	epth 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					
			7.					
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF					
			Com.					
GAS WELL Actual 1867 Test-MCF/D	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate					
back pressure	Tubing Pressure (Shut-in )	Casing Pressure (Shut-in) 642	Choke Size 75"					
VI. CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION					
I hereby contify that the sules and	hereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.							
Commission have been complied v			y A. R. Kendrick					
20010 to tide and complete to the	, seek of my knowledge and belief.	SUPERVISOR DIST, 63						
12 State	lo da	This form is to be filed in compliance with RULE 1104.						
Area Adm.	nwe) Supervisor	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.						
<del></del>		All sections of this form must be filled out completely for allow-						
	/°10, 1978	able on new and recompleted war Fill out only Sections I.	vells.  II, III, and VI for changes of owner,					
(Da	ite)	well name or number, or transporter, or other such change of condition.						