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Appropriate District Office
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1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator AMOCO PRODUCTION COMPANY	Well API No. 30-045-23976
Address P.O. BOX 800, DENVER, COLORADO 80201	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name FLORANCE	Well No. 119	Pool Name, including Formation BASIN FRUITLAND COAL GAS	Kind of Lease FED.	Lease No. SF-080246
Location				
Unit Letter A	: 1085'	Feet From The N	Line and 800'	Feet From The E Line
Section 22	Township 29N	Range 9W	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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
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	P.O. BOX 4990, FARMINGTON, NM 89499			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
Is gas actually connected?	When?			

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'v	Diff Res'v
		XXX				XXX		
Date Spudded 12/29/80	Date Compl. Ready to Prod. 11/14/91		Total Depth 6901' 6907			P.B.T.D. 2523'		
Elevations (DF, RKB, RT, GR, etc.) 5805' G.R.	Name of Producing Formation FRUITLAND COAL		Top Oil/Gas Pay 2192'			Tubing Depth 2297'		
Perforations 2192'-2290' Fruitland Coal				Depth Casing Shoe				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8"		330'		250 SX CL B W/290 CaCl			
8 3/4"	7"		2900'		300 SX 65/35 POZ:150 SX			
6 1/4"	4 1/2"		6900'		CL B, 305 SX BJ LITE;			
	23/7		2297		150 SX CL B 350			

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test - MCF/D 416	Length of Test 24	Bbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pilot, back pr.) FLOWING	Tubing Pressure (Shut-in) 320	Casing Pressure (Shut-in) 345	Choke Size 64/64

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Cynthia Burton
Signature
Cynthia Burton, Staff Admin. Supervisor
Printed Name
3/16/92
Date
303-830-5119
Telephone No.

OIL CONSERVATION DIVISION

MAR 26 1992

Date Approved

Original Signed by **CHARLES GHOLSON**

By

Title **DEPUTY OIL & GAS INSPECTOR, DIST. #3**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance