Appropriate Listifct Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICE II P.O. Drawer DD, Anesia, NM 88210

Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III

Santa Fe, New Mexico 87504-2088

. AZEC, INI 87410	REQ				BLE AND AUTHOR LAND NATURAL G						
Operator							API No.	· · · · · · · · · · · · · · · · · · ·			
Amaca Produc	tion	<u> </u>									
2325 E 30+h	Stre	eet.	Face	nina	Other (Please exp	8740	1				
Reason(s) for Filing (Check proper box) New Well		Change in			Other (l'lease exp						
Recompletion	Oil		Dry Gas		Effective 4-	-1-89					
Change in Operator I change of operator give name	Casinghe	ad Gas	Condens	cale 🔀				ે ૧૦	305		
nd address of previous operator											
I. DESCRIPTION OF WELL. Lease Name	AND LE		In			1					
Callegos Canyon Unit Com F 162 Basin					*	of Lease Federal of Fe	of Lease No. Federal of Fee				
Location								······································			
Unit Letter	- : ड ा	50	_ Feet Fro	m The	5Line andLlos	50F	eet From The	<u> </u>	!	Line	
Section 36 Township	29	N	Range	Iau) , NMPM,	San:	Juan		Count	ty	
II. DESIGNATION OF TRAN	SPORTI	ER OF O	II. ANI) NATU	DAL CAS				•		
Name of Authorized Transporter of Oil		or Conder		<u>/11/110</u> ⊠	Address (Give address to w	vhich approved	l copy of this f	wm is to be se	ent)		
Meridian Dil Inc	P.O. Box 4289, Farmington NM 87499 Address (Give address to which approved copy of this form is to be sent)										
El Pasa Natural Ga	Caller Service 4990, Farmington NM 87499										
If well produces oil or liquids, ive location of tanks.	Unit		Twp.		is gas actually connected?	When	7	9		h-1k-	
this production is commingled with that f	rom any of		pool, give		ling order number:	l	3-6-6	5			
V. COMPLETION DATA											
Designate Type of Completion	· (X)	Oil Well	l G	as Well	New Well Workover	Deepen	Plug Back	Same Res'v	Diff Re	:E'V	
Date Spudded	Date Con	ipl. Ready to	Prod.		Total Depth	- I	P.B.T.D.	l	- 1 :1 .,		
Elevations (DF, RKB, RT, GR, etc.)	ations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth		
erforations					ļ	Depth Casin	Depth Casing Shoe				
		·····					<u> </u>				
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				CEMENTING RECORDED DEPTH SET	· ·	SACKS CEMENT				
	CASING & TUBING SIZE				DET III DET		UNONG CEMENT				
											
TEST DATA AND REQUES OIL WELL Test must be after re				il and much	be equal to or exception all	laurible for thi	a danth as ha	Con Gell 24 have	1		
Date First New Oil Run To Tank	Producing Method Wilsw. p			or jui 24 nou	75.)						
ength of Test	Tubing Pressure				Casing Pressure		Choke Size				
	rating Pressure				AP.	CHOKE SIZE	Citore Diag				
Actual Prod. During Test	Oil - libls		- 		Water - Itbls.	, 199	ONE MOR		4) 1		
GAS WELL .				+· 	<u> </u>		<u> </u>		1 A		
al Prod. Test - MCF/D Length of Test					Bbls. Condensate/MMCF	ondensate	! -!:				
	<u>насиле</u> ть:				Authorities and an an and an an and an an and an an an		J,, al	Choke Size			
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)		Choke Size				
I. OPERATOR CERTIFICA	ATE OF	COMP	LIAN	CE	011 001	10001	A 771 () 1	~ 11 11 ~ 1 ~			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.					Date Approved						
/ 3 \ 5 \ 5 \					APR 03 1989						
Signature					By						
B.D. Shaw Adm. Supy					Title (ALEXA INION DISTRICT # 5						
3-29-89 (505) 325-8841 Date Telephone No.					Title	· · · · · · · · · · · · · · · · · · ·		~ <u>~ 7</u>	<u>. – </u>	 -	
Pald	11			· · · · · · · · · · · · · · · · · · ·	. :,						

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

- 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 with Rule 111.

 2) All sections of this form must be filled out for allowable on new and recompleted wells.

 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

- 4) Separate Form C-104 must be filed for each pool in multiply completed wells