

PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District II
1900 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

STATE OF NEW MEXICO
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address AMOCO PRODUCTION COMPANY P O Box 800 Denver, Colo. 80201		OGRID Number 000778
		Reason for Filing Code Recompletion
API Number 30 - 0 45 07996	Pool Name Blanco MesaVerde	Pool Code 72319
Property Code 587	Property Name Garcia Gas Com "B"	Well Number #1

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	21	29N	10W	J	1805	South	2350	East	San Juan

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Use Code P	Producing Method Code	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
07057	EPNG P. O. Box 4990 Farmington, NM 87499	199730		

RECEIVED
JAN 23 1995

IV. Produced Water

POD	POD ULSTR Location and Description
199750	

OIL CON. DIV.
DIST. 3

V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
6/23/65	1/10/95	6518'	5226'	3938' - 4316'
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
12 1/4"	8 5/8"	932'	800 sx	
7 7/8"	4 1/4"	6518'	1625' sx	
Tubing	2.375	4215		

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
		1/05/95	20 Hrs	410 PSI	520 PSI
Choke Size	Oil	Water	Gas	AOP	Test Method
32/64	0	6	1500		

I hereby certify that the rules 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.

Signature: *Lois Raeburn*

Printed name: Lois Raeburn

Title: Business Assistant

Date: 1/18/95 Phone: (303)

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY ERNIE BUSCH

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

Approval Date: FEB 03 1995

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date

22.	IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT
23.	Report all gas volumes at 15.025 PSIA at 60". Report all oil volumes to the nearest whole barrel. A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111. All sections of this form must be filled out for allowable requests on new and recompleted wells. Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes. A separate C-104 must be filled for each pool in a multiple completion. Improperly filled out or incomplete forms may be returned to operators unapproved.
1.	Operator's name and address
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
3.	Reason for filling code from the following table: NW New Well HC Recompletion CII Change of Operator AO Add oil/condensate transporter CO Change oil/condensate transporter AG Add gas transporter CG Change gas transporter RT Request for test allowable (include volume requested) If for any other reason write that reason in this box.
4.	The API number of this well
5.	The name of the pool for this completion
6.	The pool code for this pool
7.	The property code for this completion
8.	The property name (well name) for this completion
9.	The well number for this completion
10.	The surface location of the completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OGD unit letter.
11.	The bottom hole location of this completion
12.	Lease code from the following table: F Federal S State P Foreign J Jicarilla N Navajo U Ute Mountain Ute I Other Indian Tribe
13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift
14.	MO/DAYR that this completion was first connected to a gas transporter
15.	The permit number from the District approved C-129 for this completion
16.	MO/DAYR of the C-129 approval for this completion
17.	MO/DAYR of the expiration of C-129 approval for this completion
18.	The gas or oil transporter's OGRID number
19.	Name and address of the transporter of the product
20.	The number assigned to the POD from which this product will be transported by the transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
21.	Product code from the following table: G Gas O Oil G Gas
22.	The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD Water Tank", etc.)
23.	The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
24.	The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD Water Tank", etc.)
25.	MO/DAYR drilling commenced
26.	MO/DAYR this completion was ready to produce
27.	Total vertical depth of the well
28.	Plugback vertical depth
29.	Top and bottom perforation in this completion or casing shoe and TD if openhole
30.	Inside diameter of the well bore
31.	Outside diameter of the casing and tubing
32.	Depth of casing and tubing. If a casing liner show top and bottom.
33.	Number of sacks of cement used per casing string
34.	MO/DAYR that new oil was first produced
35.	MO/DAYR that gas was first produced into a pipeline
36.	MO/DAYR that the following test was completed
37.	Length in hours of the test
38.	Flowing tubing pressure - oil wells
39.	Shut-in tubing pressure - gas wells
40.	Flowing casing pressure - oil wells
41.	Shut-in casing pressure - gas wells
42.	Diameter of the choke used in the test
43.	Barrels of oil produced during the test
44.	Barrels of water produced during the test
45.	MCF of gas produced during the test
46.	Gas well calculated absolute open flow in MCF/D
47.	The method used to test the well: F Flowing P Pumping S Swabbing I If other method please write it in.
48.	The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report
49.	The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person