COPIES RECEIVED		4	
STRIBUTION			
ALE		7	
5.5.			
1D OFFICE			
ANSPORTER	OIL		
	GAS		
PEHATOR		IT	
POS ATION OFFICE		I	1 1

5/15/79

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Separate Forms C-104 must be filed for each pool in multiply

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

5.5.	_ AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS		
1D OFFICE	-				
ANSPORTER GAS	7	•	ADI 20-0/16-02162		
PERATOR			API 30-045-23163		
PROPATION OFFICE	<u> </u>	·	9		
AMOCO PRODUCTION COMP	ANY				
Address	44414		•		
501 Airport Drive Fa		Tou in			
Reason(s) for liling (Check proper bo		Other (Please explain)			
New Well	Change in Transporter of: Cil Dry Gas				
Change in Ownership.	Casinghead Gas Conden	— 	•		
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including Fo	ormation Kind of Lease No.			
Earl B. Sullivan	1 Bloomfield Ch	love Colored to Fee			
Location					
Unit Letter B;	Feet From The North Line	e and 1690 Feet From	The East		
0.6	ownship 29N Range	11W , NMPM, Sa	an Juan County		
Line of Section 26 To	ownship ZYN Range				
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	S .	and carry of this form is to be seed		
Name of Authorized Transporter of O	or Condensate	Address (Give address to which appr	oved copy of this form is to be sentf		
Name of Authorized Transporter of C	asinghead Gas or Dry Gas X	Address (Give address to which appr	oved copy of this form is to be sent)		
El Paso Natural Gas C	Unit Sec. Twp. Rge.	P.O. Box 990 Farmington, NM 87401 Sec. Twp. Pge. Is gas actually connected? When			
If well produces oil or liquids, give location of tanks.		No			
If this production is commingled w	rith that from any other lease or pool,	give commingling order number:			
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
Designate Type of Complet		l X			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
12/23/78	1/10/79	2861'	2806'		
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth 2734		
5436' GL, 5446' KB	Chacra .	2750	Depth Casing Shoe		
Perforations			2860'		
2750-2761 '	TUBING, CASING, AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
12-1/4"	8-5/8"	283'	350 sx 535 sx		
7-7/8"	4-1/2"	2860 ' 2734 '	135 SX		
	2-3/8"	2734			
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a)	fter recovery of total volume of load of	l and must be equal to or exceed top allow		
OIL WELL	able for this de	pth or be for full 24 hours)	·		
Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	1111. ELL.)		
	Tubing Pressure	Casing Pressure	Choke Size		
Length of Test	Tubing Pressure	-			
Actual Prod. During Test	Oil-Bbis.	Water - Bbis.	Gas-MCF		
•					
			1.9		
GAS WELL Actual Prod. Tost-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	3 hours				
4691 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
Back Pressure	967 psig	967 psig	75"		
CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION		
		MAT	1 6 1979 Kendrick 19		
a litter base been complied	regulations of the Oil Conservation with and that the information given	APPROVED Original Signed b	J •		
above is true and complete to t	he best of my knowledge and belief.	SUPERVISOR DISTRICT # 3			
		TITLE			
	- E	This form is to be filed in compliance with RULE 1104.			
	70 JOSA	If this is a request for allowable for a newly drilled or deepens well, this form must be accompanied by a tabulation of the deviation			
1 (51)	nature)	well, this form must be accomp	ordance with MULE 111.		
	rative Supervisor	All sections of this form t	nust be filled out completely for allow		
(Title)		able on new and recompleted	wells. It and VI for changes of owner		
5/15/79		well name or number, or transport	orter, or other such change of condition		