t	-		/	
DISTRIBUTION ANTA FE	NEW MEXICO OF	OIL CONSERVATION COMMISSION UEST FOR ALLOWABLE AND Form C-104 Supersedes Old C-104 and 6 Effective 1-1-65		
FILE	REQUE			
U.S.G.S.				
LAND OFFICE	AUTHORIZATION TO T	TRANSPORT OIL AND NATURAL GAS		
TRANSPORTER OIL GAS /				
OPERATOR /				
PRORATION OFFICE	 '		API 30-045-23550	
Operator				
Amoco Production Com	pany			
501 Airport Drive Reason(s) for filing (Check proper b	Farmington, NM 87401			
New Well	Change in Transporter of:	Other (Please exp	plain)	
Recompletion	[Gas		
Change in Ownership	a	densate		
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL ANI) LEASE			
State Gas Com "BS"	Well No. Pool Name, Including		d of Lease No	
Location BS	1 Bloomfield C	Thacra Ext. Stor	te, Federal or Fee State	
Unit Letter K ; 14	450 Feet From The South	_ine and _ 1755 _	eet From The West	
22	ownship 29N Range	11W , NMPM,	Con Inc.	
III DEGICALATION OF THE		,	Sall Juan County	
III. DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL G	Address (Give address to wh	ich approved copy of this form is to be sent)	
Name of Authorized Transporter of Co	Tologia de la Companya de la Company		·	
El Paso Natural Gas (ich approved copy of this form is to be sent)	
	Unit Sec. Twp. Rge.	P.O. Box 990, Fa	rmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Twp. rige.	Is gas actually connected?	When	
If this production is commingled w	ith that formal and the state of the state o	No	Within 90 days	
IV. COMPLETION DATA	ith that from any other lease or pool	, give commingling order num	ber:	
Designate Type of Completi	Oil Well Gas Well	New Well Workover De	eepen Plug Back Same Res'v. Diff. Res'	
	X	X		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
11-12-79 Elevations (DF, RKB, RT, GR, etc.)	1-25-80	2954	2801 '	
5433' GL, 5446' KB	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations	Chacra	2746	2768'	
2746-52', 2754-61'			Depth Casing Shoe	
<u> </u>	TUBING CASING AN	D CEMENTING RECORD	2954	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS SEMENT	
12-1/2"	8-5/8", 24,0#	3001	SACKS CEMENT	
7-7/8"	4-1/2", 10.5#	2954'	300 sx 810 sx	
	2-3/8", 4.7#	2768	010_SX	
V. TEST DATA AND REQUEST FO		after recovery of total volume of	load oil and must be equal to or exceed top allo	
OIL WELL Date First New Oil Run To Tanks	able for this de	epin or be jor juit 24 hours)	- 1 In-	
	54.0 01 1031	Producing Method (Flow, pum	o of the Ant D	
Length of Test	Tubing Pressure	Casing Pressure	/ATTURNET	
	-		1080	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	CH BEENGEON!	
			CON. 3 EKB SE VICEONI. CON. SIZEONI.	
			OIL CON. 3	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
4843 Testing Method (pitot, back pr.)	3 hours			
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Back Pressure	1040 PSIG	1045 PSIG	.75	
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		

VI. C

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

Cliginal Signed By E. E. SVOBODA

(Signature)

District Administrative Supervisor

(Date)

2-20-80

3 1980 MAR APPROVED_

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

TITLE .

This form is to be filed in compliance with RULE 1104.

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.

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

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Concerts Forms C-104 must be filed for each most in multiply