

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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Operator	

Amoco Production Company

Address
501 Airport Dr., Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

add

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Gallegos Canyon Unit	Well No. 134E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. SF-080491
Location Unit Letter <u>I</u> : <u>1570</u> Feet From The <u>South</u> Line and <u>840</u> Feet From The <u>East</u> Line of Section <u>17</u> Township <u>29N</u> Range <u>12W</u> , NMPM, <u>San Juan</u> County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Giant Industries, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 256, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Amoco Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3092, Houston, TX 77001
If well produces oil or liquids, give location of tanks.	Unit <u>I</u> Sec. <u>17</u> Twp. <u>29N</u> Rge. <u>12W</u> Is gas actually connected? <u>No</u> When

If this production is commingled with that from any other lease or pool, give commingling order number:

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 10-29-81	Date Compl. Ready to Prod. 11-25-81	Total Depth 6405'	P.B.T.D. 6364'					
Elevations (DF, RKB, RT, GR, etc.) 5694' G.L.	Name of Producing Formation Basin Dakota	Top Oil/Gas Pay 6158'	Tubing Depth 6284'					
Perforations 6158'-6168', 6230'-6256', 6271'-6288'			Depth Casing Shoe 6405'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	332'	280 sx					
7-7/8"	4-1/2"	6405'	1270 sx					
	2-3/8"	6284'						

IV. 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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF



GAS WELL

Actual Prod. Test-MCF/D 889	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1156 PSIG	Casing Pressure (Shut-in) 1156 PSIG	Choke Size .75"

V. 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.

Original Signed By
J. J. EVOSODA

(Signature)

District Administrative Supervisor

(Title)

JAN 5 1982

OIL CONSERVATION DIVISION

2-5-82 FEB 5 1982
APPROVED _____, 19____

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, or the transporter, or the pool, or the formation, or the completion.

Sections I, II, III, and VI must be filled out for all wells, including those which are not producing.