

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

3109/12  
4-17-84

Operator Amoco Production Company	
Address 501 Airport Drive, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of ownership give name and address of previous owner	

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OIL CON. DIV.  
DIST. 3

DESCRIPTION OF WELL AND LEASE					
Lease Name Abrams "J"	Well No. 1	Pool Name, including Formation Armenta Gallup	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter I	1615	Feet From The south	Line and 1115	Feet From The east	
Line of Section 29	Township 29N	Range 10W	NMPM, San Juan		County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)		
Giant Refinery PLA			P. O. Box 256, Farmington, NM 87401		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company			P. O. Box 990, Farmington, NM 87401		
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 29	Twp. 29N	Rge. 10W	Is gas actually connected? When No

If this production is commingled with that from any other lease or pool, give commingling order number:									
COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-6-82		Date Compl. Ready to Prod. 2-18-83		Total Depth 5778'		P.B.T.D. 5740'			
Elevations (DF, RKB, RT, GR, etc.) 5535' GL		Name of Producing Formation Gallup		Top Oil/Gas Pay 5314'		Tubing Depth 5490'			
Perforations 5314'-5336', 5356'-5628', 5630'-5690' 2 JSPF 708 .38" holes.						Depth Casing Shoe 5763'			

TUBING, CASING, AND CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET	SACKS CEMENT
17-1/2"	54.5# 13 3/8"	J-55	315'	619
12-1/4"	47# 9 5/8"	S-95	3454'	1300
8-1/2"	7" liner		3208-5304'	450
6-1/4"	4-1/2" liner		5135-5763'	155
	2-3/8"		5490'	

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 5-21-83	Date of Test 5-22-83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure 75	Casing Pressure ---	Choke Size 32/64
Actual Prod. During Test	Oil-Bbls. 50.5	Water-Bbls. 0	Gas-MCF 205

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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 D.D. Lawson	
(Signature)	
Dist. Admin. Supvr.	
(Title)	
6-13-83	
(Date)	

OIL CONSERVATION DIVISION	
JUN 17 1983	
APPROVED	19
BY	Original Signed by FRANK T. CHAVEZ
TITLE	SUPERVISOR DISTRICT # 3
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.	
Separate Forms C-104 must be filled for each pool in multiply completed wells.	