

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator AMOCO PRODUCTION COMPANY	Well API No. 3004525618
Address P.O. BOX 800, DENVER, COLORADO 80201	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> 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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator _____	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sanchez Gas Com C	Well No. #1	Pool Name, including Formation Blanco Mesaverde	Kind of Lease Fee	Lease No.
Location				
Unit Letter <u>A</u>	: <u>750</u>	Feet From The <u>North</u> Line and	<u>660</u>	Feet From The <u>East</u> Line
Section <u>28</u>	Township <u>29N</u>	Range <u>10W</u>	<u>NMPM</u>	San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil	3535 30th Street, 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	P.O. Box 4990, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit Soc. Twp. Rge. Is gas actually connected? When?

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

IV. COMPLETION DATA

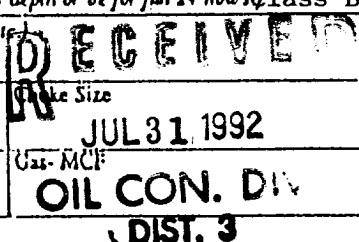
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rec'v	Diff Rec'v
		XX				XX		
Date Spudded 4/19/83	Date Compl. Ready to Prod. 12/29/84	Total Depth 5852'	P.B.T.D. 5800'					
Elevations (DF, RKB, RT, GR, etc.) 5503' KB	Name of Producing Formation Mesaverde	Top Oil/Gas Pay 3445'	Tubing Depth 5640'					
Perforations 3445' - 4396' Mesaverde		Depth Casing Shoe						

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14 3/4"	11 3/4"	335'	516 cf Class B w/2% CaC2
7 7/8"	5 1/2"	5848'	1) 693 Class B 50:50 Poz tailed in w/118 cf Class
	2 3/8"	5640'	B Neat. 2) 1155 cf. Class B 50:50 poz. Tailed w/177 cf. Class B Neat.

V. 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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Dbls.	Water - Dbls.	

GAS WELL

Actual Prod. Test - MCF/D 462	Length of Test 3 hours	Dbls. Condensate/MCF -0-	Gravity of Condensate -0-
Testing Method (pilot, back pr.) Flowing.	Tubing Pressure (Shut-in) None	Casing Pressure (Shut-in) 301	Choke Size .75"

VI. OPERATOR 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.

Cindy Burton / per  
Signature  
Cynthia Burton, Staff Admin. Supervisor  
Printed Name  
7-29-92  
Date  
303-830-4280  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 05 1992  
By Original Signed by CHARLES GHOLSON  
Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance