Appropriate District Office DISTATICE! P.O. Box 1980, Holler, NM 88240 DISTRICT II P.O. Drawer DD, A iia, NM 88210

Energy, Minerals and Natural Resources Department

Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICTIII	2	Santa Fe, New M	lexico 8750	04-2088				
1000 Rio Brazos Rd, Aztec, NM 87410		FOR ALLOWA						
I. Operator	TOTE	RANSPORT OI	L AND NA	TURAL GA		API No.		
Λ	tion Co		·					
Reason(s) for Filing (Check proper box)	Street,	Farming	401 Oth	NM cr (Please expla	8740	1		
New Well	Change	in Transporter of:	1	•	•			
Recompletion Oil Dry Gas Change in Operator Casinghead Gas Condensate			Effect	ive 4-1	- 67		١١٥٥	0252
If change of operator give name and address of previous operator								
II. DESCRIPTION OF WELL	AND LEASE							
Lease Name	Well No. Pool Name, Include					of Lease		ease No.
Abrams L Location	L Blanco			erde.	State,	Federal & Fe	الع	
Unit Letter	330	_ Feet From The	Line	and <u>33</u>	O Fe	et From The	S	Line
Section 26 Township	NPE 9	Range 100) , Nh	APM,	San :	Tuan		County
III. DESIGNATION OF TRAN	SPORTER OF O				···			
Name of Authorized Transporter of Oil Meridian Dillo	1	e address to wh				•		
Name of Authorized Transporter of Casing	Address (Give	oddress to wh	<u>, tarm</u> ich approved	copy of this form is to be sent)				
Sunterra			PO.B	Pal81 x0	Bloor	nfield NM 87413		
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge.	is gas actually	connected?	When	7		
If this production is commingled with that t	from any other lease of		ling onler numb	жег:		 	i	
IV. COMPLETION DATA								
Designate Type of Completion	[Oil We - (X)	II Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready	to Prod.	Total Depth			P.B.T.D.	l	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Top OivGas P	ay		Tubing Depth			
Perforations	L		I			Depth Casin	g Shoe	****
HOLE SIZE		LIBING SIZE		NG RECORI DEPTH SET)		SACKS CEME	CAIT
1144	CASING & TUBING SIZE		DEFINSE			SACING CEMENT		
						,		
						<u> </u>	· · · · · · · · · · · · · · · · · · ·	········
V. TEST DATA AND REQUES			I	·		1		
OIL WELL (Test must be after re Date First New Oil Run To Tank	covery of total volum	e of load oil and must					for full 24 how	75.)
Date I has been On Rull 10 12hk	Date of Test		Producing Me	thod (I low, pw	np, gas iyi, e	(c.)		
Length of Test	Tubing Pressure		Casing Pressur	ie		Choke Size		
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.			Gas- MCF			
GAS WELL &	L		I			<u> </u>	·	
Actual Prod. Test - MCF/D	MCF/D Length of Test			ate/MMCF		Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shu	ut-in)	Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFICA	ATE OF COM	DELANCE	f			L		
I hereby certify that the rules and regula	tions of the Oil Conse	rvation	C	IL CON	SERVA	ATION I	DIVISIO	N
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			Date Approved			APP 09 1099		
BUShaw				vahhi 0480			1	
Signature	Λι',	Su py	Ву			<u> </u>		
Printed Name	Title_		S UPEN	WISION.	DISTRIC	r # 3		
3-29-89 (5 Date	05) 325-8 Tel	841 cphone No.						

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 with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

DISTRICT

Energy, Minerals and Natural Resources Department

Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III	S	anta Fe, New M	exico 8750	4-2088					
I		FOR ALLOWAE ANSPORT OIL							
Operator	Weil					API No.			
Amoca Produc	tion Co								
	Street.	Farming		NM	8740	1			
Reason(s) for Filing (Check proper box) New Well	Change:	in Transporter of:	· ·	er (Please expla	•				
Recompletion		Dry Gas	Effect	ive 4-1	-89				
Change in Operator If change of operator give name	Casinghead Gas	_ Condensate					150	2698	
and address of previous operator						····			
. DESCRIPTION OF WELL AND LEASE ease Name Well No. Pool Name, Including Formation Kind of Lease									
						of Lease No. , Federal of Fee			
Location	2 3 A			,			_		
Unit Letter	: 330	Feet From The	Line	and <u>33</u>	<u>O</u> Fc	et From The		Line	
Section 26 Township	NPE	Range 100	NN,	APM,	San I	Tuan		County	
III. DESIGNATION OF TRAN	SPORTER OF C	DIL AND NATU	RAL GAS						
Name of Authorized Transporter of Oil	or Condo	ensate	ł	address to wh				· =	
Meridian Dil Inc. Name of Authorized Transporter of Casing	P.O. Box 4289, Farmington NM 87499 Addics (Give address to which approved copy of this form is to be sent)								
Sunterra If well produces oil or liquids,	Unit Sec.	Twp. Rgc.				mfield NM 87413			
give location of tanks.	$ m ^{26}$	San lom	is gas actually	connected?	When				
If this production is commingled with that f IV. COMPLETION DATA	rom any other lease o	r pool, give commingl	ling order numb	ег:					
	Oil We	ll Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion -	Date Compl. Ready	to Prod.	Total Depth			P.B.T.D.		1	
						r.b. t.D.			
Elevations (DF, RK#, RT, GR, etc.)	Name of Producing I	Formation	Top Oil/Gas f	'ay		Tubing Depth			
Perforations	L	· · · · · · · · · · · · · · · · · · ·	1		·	Depth Casing	Shoe		
	TURING	CASING AND	CENTENTIN	C BECODE	<u> </u>			•	
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
· · · · · · · · · · · · · · · · · · ·						,			
				· · · · · · · · · · · · · · · · · · ·					
V. TEST DATA AND REQUES	T FOR ALLOW	ABLE	<u> </u>			J			
OIL WELL , (Test must be after re	ecovery of total volum	•					r full 24 hour	·s.)	
Date First New Oil Run To Tank	Date of Test		Producing Me	thod (Flow, pu	mp, gas lýt, e	Ic.)			
Length of Test	Tubing Pressure		Casing Pressu	ie		Choke Size			
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.			Gas- MCF			
÷.	<u></u>		<u> </u>			<u> </u>	,	· .	
GAS WELL Actual Prod. Test - MCF/D	manus securi	7. 1. 7	Bbls. Condens			121	·- ,		
Actual Flod. Test - MC17D	Length of Test			sale/MIMICI.	·	Gravity of Condensate			
l'esting Method (pital, back pr.)	Tubing Pressure (She	Casing Pressure (Shut-in)			Choke Size				
VI. OPERATOR CERTIFICA	ATE OF COM	PLIANCE				<u>.</u>			
I hereby certify that the rules and regula	tions of the Oil Conse	ervation		OIL CON	SERV	ATION E	NVISIO	N	
Division have been complied with and the is true and complete to the best of my kind.		ven above	Doto	Annroye	-1	ADD no	1000		
\mathcal{C}				Date ApprovedAPR 0.3 1929					
Signature					Eni	<u>人). ()</u>	brand	 	
B.D. Shaw Adm. Super					SUPER	RVISION	ISTRICT	r# 3	
3-29-89 (5	Title_			······································					
L'ette	101	ophone No.	11					4.5	

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