CORRECTED REPORT TO SHOW CORRECT TUBING DEPTH

Form C-105
Revised 10-1-78

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease: State [ ] Fee [X]

5. State Oil & Gas Lease No.

1a. TYPE OF WELL: OIL WELL [XX] GAS WELL [ ] DRY [ ] OTHER

b. TYPE OF COMPLETION: NEW WELL [XX] WORK OVER [ ] DEEPEN [ ] PLUG BACK [ ] DIFF. RESVR. [ ] OTHER

RECEIVED
MAY 07 1984
OIL CON. DIV.
DIST. 3

7. Unit Agreement Name

8. Farm or Lease Name: Armenta Com "F"

2. Name of Operator: Amoco Production Company

9. Well No.: 1

3. Address of Operator: 501 Airport Drive, Farmington, New Mexico 87401

10. Field and Pool, or Wildcat: Armenta Gallup

4. Location of Well: UNIT LETTER H LOCATED 2120 FEET FROM THE North LINE AND 835 FEET FROM THE East LINE OF SEC. 27 TWP. 29N RGE. 10W NMPM

12. County: San Juan

15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Cashinghead
5-31-83	6-7-83	7-15-83	5521' GL	5508' GL

20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools	Cable Tools
5925'	5786'		→	0-TD	

24. Producing Interval(s), of this completion — Top, Bottom, Name: 5324' - 5536' - Gallup

25. Was Directional Survey Made: Yes

26. Type Electric and Other Logs Run: DIL-SP-R FDC-CNL-Cal-GR

27. Was Well Cored: No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
11-3/4"	42# H40	298'	14-3/4"	540 cu.ft Class B w/2% CaCl2 circ to surf	
5-1/2"	15.5# K55	5924'	7-7/8"	Stage 1) 693 cu.ft. Class B 50:50 POZ. Ta in w/177 cu.ft. Class B neat. 2) 1478 cu. Class B 65:35 Poz. Tailed in w/118 cu.ft Class B Neat	

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET
2-7/8"	5591'	

31. Perforation Record (Interval, size and number)

5324'-5440' and 5462'-5536' with 1 jspf for a total of 190 holes .38" in diameter

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
5324'-5536'	122,000 gals. 70 quality foam containing 20# gelled water, .5 millicuries radioactive san /1000#, and 16800# 20-40 sand.

33. PRODUCTION

Date First Production	Production Method (Flowing, gas lift, pumping — Size and type pump)	Well Status (Prod. or Shut-in)
7-23-83	Pumping	SI

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period →	Oil — Bbl.	Gas — MCF	Water — Bbl.	Gas—Oil Ratio
8-3-83	24	36/64		4.6	134.4	0	29217

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate →	Oil — Bbl.	Gas — MCF	Water — Bbl.	Oil Gravity — API (Corr.)
135 psi	135 psi		4.6	134.4	0	41

34. Disposition of Gas (Sold, used for fuel, vented, etc.): To be sold

Test Witnessed By: Ted's Field Service

35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

Original Signed By
B. D. Shaw

NAME B.D.Shaw TITLE Admin. Supervisor DATE 5-2-84

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
OCT 12 1988
OIL CON. DIV.
DIST. 3

I.

Operator: Amoco Production Company

Address: 2325 E. 30th Farmington NM 87401

Reason(s) for filing (Check proper box)

- [ ] New Well
- [ ] Recompletion
- [ ] Change in Ownership

Change in Transporter of:

- [x] Oil
- [x] Casinghead Gas
- [ ] Dry Gas
- [ ] Condensate

Other (Please explain)

If change of ownership give name and address of previous owner ____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Armenta Com F	1	Armenta Gallup	Fee	

Location

Unit Letter H : 2120 Feet From The North Line and 835 Feet From The East

Line of Section 27 Township 29N Range 10W , NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [x] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Permian Corporation	P.O. Box 1702 Farmington NM 87499

Name of Authorized Transporter of Casinghead Gas [x] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	Caller Service 4990 Farmington NM 87499

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	H	27	29N	10W	No	

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

NOTE: *Complete Parts IV and V on reverse side if necessary.*

VI. 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 is true and complete to the best of my knowledge and belief.

B D Shaw
(Signature)

Adm. Supervisor
(Title)

October 11, 1988
(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 12 1988, 19____

BY [signature]

TITLE SUPERVISION 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 filed for each pool in multiply completed wells.

3101 IN
4-17-84

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: Amoco Production Company

Address: 501 Airport Drive, Farmington, New Mexico

Reason(s) for filing (Check proper box)
- [XX] New Well
- [ ] Recompletion
- [ ] Change in Ownership

Change in Transporter of:
- [ ] Oil
- [ ] Casinghead Gas
- [ ] Dry Gas
- [ ] Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease: State, Federal or Fee	Lease No.
Armenta Com "F"	1	Armenta Gallup	Fee	

Location: Unit Letter H ; 2120 Feet From The North Line and 835 Feet From The East

Line of Section 27 Township 29N Range 10W , NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [x] or Condensate [ ]: Plateau, Inc.

Address (Give address to which approved copy of this form is to be sent): P.O. Box 489, Bloomfield, New Mexico 87413

Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]: Currently not dedicated

Address (Give address to which approved copy of this form is to be sent):

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	H	27	29N	10W	No	

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

NOTE: *Complete Parts IV and V on reverse side if necessary.*

VI. 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 is true and complete to the best of my knowledge and belief.

Original Signed by
[illegible]

(Signature)

District Administrative Supervisor

(Title)

December 19, 1983

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 21 1983 , 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

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

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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 filed for each pool in multiply completed wells.

IV. 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	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
5-31-83	7-15-83	5925'	5786'
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
5521' GR	Armenta Gallup	5324'	5990'
			Depth Casing Shoe 5924'

Perforations
5324'-5440', 5462'-5536', 1 jspf, .38" in dia. for a total of 190 holes.

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-3/4"	11-3/4", 42#, H-40	298'	450
7-7/8"	5-1/2", 15.5#, K-55	5924'	1450
	2-7/8"	5990'	

V. TEST DATA AND REQUEST FOR ALLOWABLE *(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)*

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
7-23-83	8-3-83	Shut-In	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 hrs.	135 psi Flowing	135 psi Flowing	36/64
Actual Prod. During Test	**Oil - Bbls.**	**Water - Bbls.**	**Gas - MCF**
	4.6	0	134.4

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	**Tubing Pressure (Shut-in)**	**Casing Pressure (Shut-in)**	**Choke Size**