

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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

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)

| | | |
|--|---|-------------------------------------|
| <input checked="" type="checkbox"/> New Well | Change in Transporter of: | <input type="checkbox"/> Dry Gas |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> Oil | <input type="checkbox"/> Condensate |
| <input type="checkbox"/> Change in Ownership | <input type="checkbox"/> Casinghead Gas | |

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|------------------|
| Lease Name Armenta Com "F" | Well No. 1 | Pool Name, including Formation Armenta Gallup | Kind of Lease State, Federal or Fee | Lease No. Fee |
| Location Unit Letter <u>H</u> : <u>2120</u> Feet From The <u>North</u> Line and <u>835</u> Feet From The <u>East</u> Line of Section <u>27</u> Township <u>29N</u> Range <u>10W</u> , NMPM, <u>San Juan</u> County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|---|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> 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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> 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 |
| <u>H</u> <u>27</u> <u>29N</u> <u>10W</u> | <u>No</u> |

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.

(Signature)
District Administrative Supervisor

District Administrative Supervisor

December 19, 1983

(Date)

OIL CONSERVATION DIVISION

APPROVED **DEC 21 1983**
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 deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-completed wells.

IV. COMPLETION DATA

| IV. COMPLETION DATA | | | | | | | | | |
|--|---|----------|----------|--------------------------|----------|--------|----------------------------|--------------|----------------|
| Designate Type of Completion -- (X) | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Some Rest'v. | Drill. Rest'v. |
| | | X | | X | | | | | |
| Date Spudded 5-31-83 | Date Compl. Ready to Prod. 7-15-83 | | | Total Depth 5925' | | | P.B.T.D. 5786' | | |
| Elevations (DF, RKB, RT, GR, etc.) 5521' GR | Name of Producing Formation Armenta Gallup | | | Top Oil/Gas Pay 5324' | | | Tubing Depth 5990' | | |
| Perforations 5324'-5440', 5462'-5536', 1 jspf, .38" in dia. for a total of 190 holes. | | | | | | | Depth Casing Shoe 5924' | | |

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 OIL WELL

(Test must be after recovery of total volume of flood 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 7-23-83 | Date of Test 8-3-83 | Producing Method (Flow, pump, gas lift, etc.) Shut-In | |
| Length of Test 24 hrs. | Tubing Pressure 135 psi Flowing | Casing Pressure 135 psi Flowing | Choke Size 36/64 |
| Actual Prod. During Test | Oil - Bbls. 4.6 | Water - Bbls. 0 | Gas - MCF 134.4 |

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 |