811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

District	IV		
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Date:

4/11/96

Previous Operator Signature

Phone: (303) 830-6157

Printed Name

" If this is a change of operator fill in the OGRID number and name of the previous operator

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APR 1 2 1996

Title

Date

2040 South Pacheco, Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATI Operator name and Address Amoco Production Company Re Completed uf new Name P. O. Box 800 Denver, Colorado 80201 <sup>4</sup> API Number 1 Pool Name 30 - 0 4525671 Blanco Mesaverde <sup>1</sup> Property Code Armenta Cos Com F (Old) Armenta Gas Com C (New) 000272 10 Surface Location Section Township Runge Lot.lda Feet from the North/South Line | H 27 29N 10W 2120 North 11 Bottom Hole Location UL or lot no. Section Township Feet from the North/South line 12 Lie Code 11 Producing Method Code 14 Gas Connection Date 13 C-129 Permit Number III. Oil and Gas Transporters Transporter OGRID " Transporter Name " POD 11 O/G and Address Williams Field Services 25244 G P. O. Box 58900 Salt Lake City, Utah 84158 9018 Giant Refining Co. P. O. Box 12999 Scottsdale, Arizona 85267 Produced Water POD H POD ULSTR Location and Descr Well Completion Data " Spud Date 1. Ready Date " TD " PBTD " Hole Size 32 Caving & Tubing Size " Depth Set VI. Well Test Data 1 Date New Oil h Gus Delivery Date " Test Date H Test Length 4 Choke Size 4 Oil 4 Water " Gus 49 I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my OIL CONSERVATION DIVISION knowledge and belief Stylerun Signature: Approved by: Printed name: Gail M. Jefferson Title: SUPERVISOR DISTRICT #3 Title: Approval Date: Admin. Staff Asst

## New Mexico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

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

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

- 1. Operator's name and address
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator (Include the effective date.)

AO Add oil/condensate transporter

CO Change oil/condensate transporter

Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include volume requested)

requested)

If for any other reason write that reason in this box.

- 4. The API number of this well
- 5 The name of the pool for this completion
- 6. The pool code for this pool
- The property code for this completion
- 8. The property name (well name) for this completion
- 9. The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- 11. The bottom hole location of this completion
- Lease code from the following table:
  F Federal
  S State
  P Fee
  J Jicarilla 12.

  - Navajo Ute Mountain Ute Other Indian Tribe
- 13. The producing method code from the following table:
- Flowing Pumping or other artificial lift
- 14. MO/DA/YR that this completion was first connected to a gas transporter
- The permit number from the District approved C-129 for this completion 15.
- MO/DA/YR of the C-129 approval for this completion 16.
- MO/DA/YR of the expiration of C-129 approval for this completion
- 18. The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- Product code from the following table:
  O Oil
  G Gas 21.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.)
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 23
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26
- 27 Total vertical depth of the well
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore. 30.

- 31. Inside diameter of the well bore
- Outside diameter of the casing and tubing 32.
- 33. Depth of casing and tubing. If a casing liner show top and bottom.
- 34 Number of sacks of cement used per casing string

If the following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

- 35. MO/DA/YR that new oil was first produced
- 36 MO/DA/YR that gas was first produced into a pipeline
- 37. MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 41. Diameter of the choke used in the test
- 42. Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44. MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- 46. The method used to test the well: Flowing Pumping Swabbin If other method please write it in.
- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report 47.
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 48.