Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

DECLIEST FOR ALLOWARI F AND ALITHORIZATION

				ALLOWAR							
l		TO TRA	NSF	PORT OIL	AND NA	TURAL G					
Operator AMOCO PRODUCTION COMPA	MOCO PRODUCTION COMPANY						Well API No. 30-045-27533				
Address P.O. BOX 800, DENVER,	COLORAD	0 8020	1								
Reason(s) for Filing (Check proper box)					Ouh	et (l'lease expl	ain)			•	
New Well				porter of							
Recompletion U	Oil		Dry (
Change in Operator	Casinghea	d Cas	Cono	cnsate [
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL	ANDIE	CE									
Lease Nather TOWELL Gas	Com	Well No. 	Pool B	Name, Including	ng Formation	d Coal	-	of Lease State	1	se Na 01 04685	
Location Unit Letter	:_85	50	. Feet	From The	N Lin	e and	<u> 70</u> 1	eet From The	۶	Line	
Section / C Township	<i>. 3</i> (<u>N</u> C	Rang	. 8	<u>и, ())</u>	MPM,	San	Jear	<u> </u>	County	
	anoner:	D 0E 0		NID NIATEI	nit als			V			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)										ν)	
Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent)										
If well produces oil or liquids,	Unit	Soc.	Twp	. Rge.	is gas actually connected? When? 1311;					3112	
If this production is commingled with that i	lenm any oth	er lease or	I	give comminal	ing order num	her					
IV. COMPLETION DATA		Oil Wel		Gas Well	New Well	Workover	Deepen	Plug Dack Sa	ume Res'v	Diff Res'v	
Designate Type of Completion		_i	i		Total Depth		J.	<u>i</u>		i	
Date Spudded	Date Compl. Ready to Prod.								P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay			Tubing Depth		
l'erforations						Depth Casing Shoe					
	TUBING, CASING AND					NG RECO	RD				
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SA	SACKS CEMENT		
					<u> </u>						
	<u>.l</u>				<u> </u>						
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABL	Æ,				art and a section for	. C.H 24 hav	1	
OIL WELL (Test must be after t	be equal to a	or exceed top at	llowable for I	this depth or be for	јші 24 кой	12					
Date First New Oil Run To Tank	Date of Test				Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure				Casing Pres				<u> </u>	1991	
Actual Prod. During Test	Oil - Bbls				Water - Bbls.			Gas-MCF Cl	OIL COM. DIV		
GAS WELL		 							Disi.	ड	
Actual Prod. Test - MCF/D	Leagth of	Test			Bbls. Cond	ensule/MMCF		Gravity of Co	odensale		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
VI. OPERATOR CERTIFIC	CATE O	F COM	PLL	ANCE	,	011 00	NICE D	VATIONI) \/ © /	אר	
I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION						
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 DEC 1,9 1991						
Digna Whaleer / Sen						Sa 179)					
Signature						By					
Doug W. Whaley, Staff Admir. Supervisor Privated Name					Titl	Title CUPETVALIA L 12 / 3					
Date		303	-830	1=4280 ne 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.

 Second Form C-104 must be filed for each pool in multiply completed wells.