mit 5 Copies .ppropriate District Office DISTRICT 1 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., Azicc, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| • | TO TRANSPORT OIL | | DI N. |
|--|--|--|--|
| AMOCO PRODUCTION COMPANY Well API No. 30-045-27551 | | | |
| Address P.O. BOX 800, DENVER, C | OLORADO 80201 | | |
| Reason(s) for Filing (Check proper box) | | Other (Please explain) | ! |
| New Well | Change in Transporter of: | | |
| Recompletion | Oil Dry Gas | | |
| Change in Operator | Casinghead Gas Condensate | | |
| | Cariginate of Control | | |
| f change of operator give name and address of previous operator | | | |
| I. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Pool Kind of Lease Lease No. | | | |
| | | Truitland gas 3 | red NM 012711 |
| Horance G | 113 Bande B | # minus guzi | 100000 |
| Location | 7701 | C 22501 | A (|
| Unit Letter | . 790' Feet From The | E Line and 2250 Foo | et From TheLine |
| <u></u> | | | 1 - |
| Section 3 Township | 30N Range 80 | U, NMPM, Dans | tuan County |
| Section O Township | | | J |
| TE PERION OF TRANS | PROPER OF OUR AND NATUR | ÀT CAS | |
| II. 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) | | | |
| Name of Authorized Transporter of Oil | or Condensate | Address (Othe address to which approved | 20p) of m2 jum 2 to 50 and |
| | | | |
| Name of Authorized Transporter of Casingl | head Gas 🔃 or Dry Gas 📈 | Address (Give address to which approved | copy of this form is to be sent) |
| Conoca elna. | | 3817 N.W. EXDIL | SSWay, OKC, OK 7311 |
| If well produces oil or liquids, | Unit Soc. Twp. Rgc. | Is gas actually connected? When | 7 |
| if well produces on or inquios, | | 1 | ļ. |
| · | | | |
| | rom any other lease or pool, give commingli | ng order number: | |
| IV. COMPLETION DATA | | | |
| | Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Res'v Diff Res'v |
| Designate Type of Completion - | | V | i i I I |
| Designate Type of Completion | | Tatal Days | DO TO |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. 21/12' |
| 12/17/89 | 1 211190 | 3143' | 3143 |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| (200 CO | Fruit and Coal | 2930 | 2927 |
| 6616 GR | oruntara com | 2100 | Depth Casing Slice |
| 100000000000000000000000000000000000000 | | | |
| | | | |
| | TUBING, CASING AND | CEMENTING RECORD | |
| 110150.45 | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| HOLE SIZE | | 285 | 325 SX CLASS B |
| 13 3/4 " | 10 3/4" | <u> </u> | 1 |
| 95/8" | 198" | 2430' | 1000 SX Class |
| | 23/8" | 2927' | 100 SX Class B |
| | | | tail ' |
| W THE THAT AND DECLIEF FOR ALLOWARIE | | | |
| V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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 (Test must be after re | ecovery of total volume of load oil and must | be equal to or exceed top anomable for the | a aepin or be jur jerev noz zy |
| Date First New Oil Run To Tank | Date of Test | Producing Method (Flow, pump, gas lift, | elc.) |
| | | | · |
| | Tulia Danasa | Casing Pressure | Choke Size |
| Length of Test | Tubing Pressure | | 1,- |
| | | | Gas- MCF |
| Actual Prod. During Test | Oil - Bbis. | Water - Bbls. | Can- MCI |
| | | F 11 1 | |
| <u></u> | | | 1 |
| GAS WELL | | | |
| Actual Prod. Test - MCI/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| 1010 | 24 hrs | (/) | |
| | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| l'esting Method (pitot, back pr.) | Tubing Pressure (situ-m) | 830 | 50 |
| 1 Dura | 40 | 030 | |
| 07.001.00 | | | |
| VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION | | | ATION DIVISION |
| I hereby certify that the rules and regulations of the Oil Conservation | | 11 | |
| Division have been complied with and that the information given above | | Date Approved | |
| is true and complete to the best of my knowledge and belief. | | | 12760 1001 |
| Date Apploved | | | |
| 1 Jour 11 Mallow / Cken | | ii | |
| way way 1 7 | | By Original Signed by FRANK T. CHAVE? | |
| Signature | | Uy | |
| Signature Doug W. Whaley, Staf | f Admin. Supervisor | Title SUPERVICE | 3 |
| Printed Name | | | the contract of the contract o |
| '((taco: talk , | Title | Title | |
| 12/18/ | Title 303-830-4280 Telephone No. | Title | |

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.

 Security From C 104 must be filed for each root in multiply completed wells.