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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

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

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Amoco Production Co.		Well API No. 30-045-27987
Address P. O. Box 800, Denver, CO 80201		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lindsey Gas Com "A"	Well No. 1	Pool Name, Including Formation Basin Fruitland Coal Gas	Kind of Lease State , Federal XXXX	Lease No. 079511
Location				
Unit Letter B	: 790'	Fect From The N	Line and 1560'	Fect From The E
Section 19	Township 30N	Range 8W	San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Northwest Pipeline Corporation		P.O. Box 58900, Salt Lake City, UT 84158
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
Is gas actually connected?		When?

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

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 12/9/90	Date Compl. Ready to Prod. 1/27/90		Total Depth 2735'		P.B.T.D. 2678'			
Elevations (DF, RKB, RT, GR, etc.) 5828' GR	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 2405'		Tubing Depth 2475'			
Perforations See attached					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		269'		235 sx Cl. B			
7-7/8"	5-1/2"		2731'		35 sx Cl. G 65/35 poz.			
	2-3/8"		2475'		200 sx Cl. G tail;			
					(2nd Stg) 430 sx Cl. G			

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.)		65/35 poz, 60 sx Cl. G tail.	
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
		APR 22 1991	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
99	24	0	0
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Flowing	300	480	1/4"

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

Signature
Doug Whaley Staff Admin. Supervisor
Printed Name
2/26/91 (303) 830-4280
Date
YES Telephone No.

OIL CON. DIV
DIST. 3

OIL CONSERVATION DIVISION

Date Approved APR 22 1991

By
Title SUPERVISOR DISTRICT #3

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.
- 4) Separate Form C-104 must be filed for each well in multiple completed wells.

Perf: 1/15/91: 2405'-2426' @ 8 JSPP, .5", 88 shots, open
2446-2453' @ 8 JSPP, .5", 56 shots, open
2466'-2472' @ 8 JSPP, .5", 48 shots, open
2498'-2508' @ 8 JSPP, .5", 80 shots, open
2532'-2541' @ 8 JSPP, .5", 72 shots, open

Frac: 1/19/91: Frac down 5½" casing with 217,720 gal slick water, 14,900# 40/70 sand,
and 143,240# 20/40 sand. AIP 3100 psi. AIR 100 BPM.