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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

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

OIL CONSERVATION DIVISION

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

CONFIDENTIAL

I.

Operator Amoco Production Company	Attention: Kelly Stearns	Well API No. 3004529053
Address P.O. Box 800 Denver Colorado 80201		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> 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

REC
FEB 22 1994
OIL CON. DIV
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name France	Well No. 1	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078385
Location Unit Letter P 1025 Feet From The South Line and 910 Feet From The East Line Section 23 Township 30N Range 8W, NMPM, 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"/> Water 2806330	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"/> EL Paso Natural Gas 2806326	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4990, Farmington, NM 87499					
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 12-30-93	Date Compl. Ready to Prod. 02-12-94	Total Depth 7715'		P.B.T.D. 7617'				
Elevations (DF, RKB, RT, GR, etc.) 6144' GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 7343'		Tubing Depth 7404'				
Perforations 7343-7596' Dakota				Depth Casing Shoe				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17.6"	13.375"		423'		500sx CLB			
12.25"	9.625"		3316'		1st stg: 350sx CLB			
8.75"	7"		6785'		2nd stg: 620sx CLB 815sx CLB			

V. TEST DATA AND REQUEST FOR ALLOWABLE

* Continued on back

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.)

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

GAS WELL

Actual Prod. Test - MCF/D 405	Length of Test 15 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Flowing	Tubing Pressure (Shut-in) 275	Casing Pressure (Shut-in) 420	Choke Size 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

Kelly Stearns

Signature
Kelly Stearns

Business Analyst

Printed Name
02/17/1994

Title

Date

(303) 830-4457

Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR - 9 1994

By ORIGINAL SIGNED BY ERNIE BUSCH

Title DEPUTY OIL & GAS INSPECTOR, DIST. 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
- 4) changes.

Hole Size	Casing & Tubing size	Depth	Sacks Cement
	4.5" Liner	6532' (top) 7715' (bottom)	150sx CLB
	2 3/8" tubing	7404'	