DISTRICT II P.O. Drawer UD, Artesia, NM 88210 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., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	TO	TRANS	SPORT OIL	AND NA	TURAL GA					
Operator Among Bundantian Common					Well API No.					
Amoco Production Company Address					8004510812					
1670 Broadway, P. O. Box 800, Denver, Colorado 80201										
Reason(s) for Filing (Check proper box) Other (Please explain)										
New Well Change in Transporter of:										
Recompletion Oil Dry Gas Change in Operator X Casinghead Gas Condensate										
If change of operator give name Topped Oil E.S. P. 6162 S. William P. 1										
Tenneco Oil E & P, 6162 S. Willow, Englewood, Colorado 80155										
II. DESCRIPTION OF WELL AND LEASE										
Lease Name	Well	I .	Name, Includi	* .			Lease No.			
NEWBERRY Location	1 BASIN (DAKOTA)					TEDE	FEDERAL SF078146			
Unit Letter A	. 790 Feet From The FNL Line and 790						Feet From The FEL Line			
Section 17 Township 31N Rangel 2W , NMPM, SAN JUAN County										
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) GIANT REFINING P. O. BOX 256, FARMINGTON, NM 87499									ruj	
Name of Anthorized Transporter of Casinghead Gas or Dry Gas [X]								copy of this form is to be sent)		
EL PASO NATURAL GAS COM	COMPANY						TX 79978			
If well produces oil or liquids, give location of tanks.	Unit Sec.	Tw	p. Rge.	is gas actually	y connected?	When	7			
If this production is commingled with that I	from any other lea	se or pool	, give commingl	ing order numb	per:					
IV. COMPLETION DATA								,- · · · · · · · · · · · · · · · · · · ·		
Designate Type of Completion		Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.		Total Depth		L	P.B.T.D.	l			
Flevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations				I			Depth Casing Shoe			
	7710	NC CA	CINC AND	CEMENTO	NC DECOR	D.	<u> </u>			
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE			DEPTH SET				SACKS CEMENT		
	ONSING & FORMS SIZE			JE. 11, 32,						
V. TEST DATA AND REQUES	T FOR ALL	ÖWÄBI	LE	1			J			
OIL WELL (Test must be after re				be equal to or	exceed top allo	wable for th	s depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	T.4.2 - D			Casing Pressure			Choke Size	Choke Size		
Length of Test	Tubing Pressure			Casing recisore			Circus Bios			
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF			
GAS WELL	1			J		·				
Actual Prod. Test - MCI/D Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
							0.75.6			
Lesting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFICATE OF COMPLIANCE					711 CON	CEDV	ΑΤΙΩΝ	DIMEI)NI	
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 ApprovedMAY 0.8 1989						
1 1 1 st				Date	Abbrose		MAY 08	- lithica		
J. J. Stampton				Ву_		スー	s d			
Simplifier J. L. Hampton Sr. Staff Admin. Suprv.				SUPERVISION DISTRICT#5						
Printed Name Title				Title		DUPERV	121040]	SIRICI	# 3°	
Janaury 16, 1989 303-830-5025 Date Telephone No.							_			

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 411.
- 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 pool in multiply completed wells.