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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New M Energy, Minerals and Natural Re

Department

Form C-104 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

PO Box 2088

DISTRICE II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 DISTRICT III 1000 Rio Brans Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No Operator Amoco Production Company 3004511177 1670 Broadway, P. O. Box 800, Denver, Colorado 80201 Other (Please explain) Reason(s) for Filing (Check proper box) New Well Change in Transporter of: Dry Gas Recompletion 1X Casinghead Gas [] Condensate [] Change in Operator If change of operator give name and address of previous operator Tenneco Oil E & P, 6162 S. Willow, Englewood, Colorado 80155 II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Lease Name SAN JUAN 32-9 UNIT BLANCO (MESAVERDE) STATE Location 1756 Feet From The FNL Line and 1645 Feet From The FEL Unit Letter SAN JUAN Section 36 Township32N HL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) [](Z Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent) O. BOX 1492, EL PASO, TX 79978 EL PASO NATURAL GAS COMPANY If well produces oil or liquids, Unit Twp. Rge is gas actually connected? If this production is commingled with that from any other lease or pool, give commingling order number IV. COMPLETION DATA Gas Well loit Well New Well | Workover Plug Back | Same Res'v Designate Type of Completion - (X) Total Denth Date Compl. Ready to Prod. ËB.T.D. Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Tubing Depth Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD CASING & TUBING SIZE SACKS CEMENT **DEPTH SET** 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 I Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Choke Size Length of Test Tubing Pressure Water - Bbls. Gas- MCF Actual Prod. During Test Oil - Bbls. GAS WELL Actual Prod. Test - MCF/D Length of Test Gravity of Condensate Tubing Pressure (Shut in) Casing Pressure (Shut-in) Choke Size lesting Method (pilot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION Thereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above MAY 08 1999 is true and complete to the best of my knowledge and belief. Date Approved By. SUPERVISION DISTRICT # 3 Sr. Staff Admin. Suprv. L. Hampton. Title Janaury 16, 1989 303-830-5025 Telephone 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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.