Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mi Energy, Minerals and Natural Re

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 Well API No. Operator Amoco Production Company 3004511877 1670 Broadway, P. O. Box 800, Denver, Colorado 80201 Reason(s) for Filing (Check proper box) Other (Please explain) Change in Transporter of: New Well Dry Gas Recompletion Casinghead Gas Condensate Change in Operator If change of operator give name Tenneco Oil E & P, 6162 S. Willow, Englewood, Colorado 80155 and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease No. Well No. Pool Name, Including Formation Lease Name 4R MUDGE LS BLANCO (MESAVERDE) FEDERAL SF078040 Location 850 Feet From The FNL Feet From The Unit Letter \_ Township 31N Range 11W NMPM SAN JUAN III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate  $X \supset$ CONOCO . O. BOX 1429, BLOOMFIELD, NM 87413 or Dry Gas [X] Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas EL PASO NATURAL GAS COMPANY P. O. BOX 1492, EL PASO, TX 79978 When? If well produces oil or liquids, Unit Sec. Rge. Is gas actually connected? - 1 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA New Well Workover Deepen Plug Back Same Res'v Diff Res'v Oil Well Gas Well Designate Type of Completion - (X) l'otal Depth Date Smidded Date Compl. Ready to Prod. PRTD Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Tubing Depth Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD CASING & TUBING SIZE SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL. (Test must be ofter 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.) Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test Casing Pressure Choke Size Length of Test Tubing Pressure Water - Bbls. Gas- MCF Actual Prod During Test Oil - Bbls. GAS WELL Actual Prod. Test - MCI/D Bbls. Condensate/MMCF Gravity of Condensate Tubing Pressure (Shut in) Casing Pressure (Shut-in) Choke Size lesting Method (pitot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above Date Approved MAY 08 1999

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

L. Hampton

Janaury 16, 1989

 Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title.

BUPERVISION DISTRICT # 3

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Staff Admin. Suprv.

303-830-5025

- 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.