State of New Mi

Form C-104

Appropriate District Office DISTRICT 1	Energy, Minera	als and Natu	ural Re	Department			Revised 1-1-89 See Instructions
P.O. Box 1980, Hobbs, NM 88240	OIL CON	SERVA	TION D	IVISION			at Bottom of Page
DISTRICT II DO Drawer DD, Artesia, NM 88210		nx 2088 exico 87504-2088				/	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQUEST FOR A				TION		
I. Operator	TO TRANSP	ORT OIL	AND NAT	URAL GAS	T Well A	Pl No	
Amoco Production Comp	any		.		1	21100	
1670 Broadway, P. O.	Box 800, Denver,	Colorado					
Reason(s) for Filing (Check proper box) New Well	Change in Transp	norter of:	Other	(Please explain)			
Recompletion [7] Change in Operator [7]	Oil Dry C	Gas []					
	neco Oil E & P, 6		Willow, E	nglewood,	Color	ado 8015	i5
II. DESCRIPTION OF WELL	AND LEASE						
Lease Name HEATON LS	Well No. Pool 1 31 BLAN		ng Formation H (PICT C	LIFFS)	FEDER	RAL	Lcase No. SF078097
Location Unit Letter	. 1180 Feet F	fr? From The FSI	L	nd 1500	For	t From The _FV	√LLine
Section 28 Townsh					— .∝ SAN JU		
			, NMI	м, с	om oc	// · · · · · · · · · · · · · · · · · ·	County
HL DESIGNATION OF TRAN Name of Authorized Transporter of Oil CONOCO	NSPORTER OF OIL AP	k 1	Address (Give a	iddress to which a	• •		
Name of Authorized Transporter of Casin	• • •	y Gas [X	Address (Give a	iddress to which a	pproved	copy of this form	is to be sent)
EL FASO NATURAL GAS CO If well produces oil or liquids, give location of tanks.	Unit Sec. Twp.	Rge.	is gas actually o	1492, EL	When		<u> </u>
If this production is commingled with that	from any other lease or pool, gi	ive conuningli	ng order number	:	J		
IV. COMPLETION DATA	Oil Well	Gas Well	New Well	Workover D	Deepen	Plug Back Sa	me Res'v Diff Res'v
Designate Type of Completion Date Spedded			Total Depth		I	P.B.T.D.	1
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	n	Top Oil/Gas Pay	,		Tubing Depth	
Perterations						Depth Casing S	hae
	TUBING, CASING AND CASING & TUBING SIZE		CEMENTING RECORD DEPTH SET			SACKS CEMENT	
HOLE SIZE							
						-	
V. TEST DATA AND REQUES						4 al -1 C-1	
OIL WELL (Test must be after t Date First New Oil Run To Tank	Date of Test			od (Flow, pump, 8			ui 24 nows)
Length of Test	Tubing Pressure		Casing Pressure			Choke Size	· · - · · - · · - · · - · · · - · · · ·
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.		-	Gas- MCF	
CACAVELL	1						
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensat	e/NIMCF		Gravity of Conc	lensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure	(Shut-in)		Clicke Size	
□. VI. OPERATOR CERTIFIC	+ ATE OF COMPLIAN	NCE			l		
Thereby 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. J. H. Hampton			OIL CONSERVATION DIVISION				
			Date Approved MAY 0.8 19			Y 0 8 10 9 €)
			Bu Bus Chang				
Superture J. L. Hampton _ Sr	. Staff Admin. Su	inrv.	Ву	SUPE	RVIS	ON DISTR	1CT # 3
Printed Name Janaury 16, 1989	Title 303-830-5		Title				

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

Date

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.

Telephone No

- 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.