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TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR		1	
PROBATION OFFICE			

Area Engineer

February 26, 1973 (Date)

(Title)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

ALITHODIZATION TO TRANSPORT OIL AND NATIONE CAS

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

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

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

į	LAND OFFICE	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL (	SAS (		
	OIL /	1		(AK)		
	TRANSPORTER GAS /					
	<del>,</del>	-		VO		
	OPERATOR /	1				
ı.	PRORATION OFFICE Operator	<u></u>				
	, ,	TTONCOMPANY				
	AMOCO PRODUCTION COMPANY Address					
501 Airport Drive, Farmington, New Mexico 87401						
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New Well	Change in Transporter of:		ļ		
	75					
	The completion of the contract					
	Change in Ownership	Cushiqueda Gus [	AFIL			
	If change of ownership give name		(AF1'F1)	/C/N		
	and address of previous owner		/ KLbLi	TD \		
		T D A O D	/ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	rmation Carlo de la	Lease No.		
		Well No. Pool Name, Including Fo	DAROTA State, Feder	al or Fee Indian 14-20-604-78		
	Ute Mountain Tribal "J'	3 114-10-11	OIL CON.	COM.		
		(O : O)	ALCT.			
	Unit Letter J ; 165	Feet From The <b>South</b> Line	and 1800 FUNSTON	The BUSE		
	11	wnship <b>31_N</b> Range	1A-W , NMPM,	San Juan County		
	Line of Section 11 Tov	wnship 31—N Range	14-W , NMPM,	Sall Atlant		
	THE PROPERTY OF THE AMERICAN	PER OF OH AND NATURAL GAS	<b>s</b>			
111.	Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GAS or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)		
			P. O. Box 108, Farmin	cton New Mayle 87401		
	Plateau, Inc. Name of Authorized Transporter of Cas	singhead Gas 👽 or Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)		
			P O Pow OOO Formin	gton, New Mexico 87401		
	El Paso Natural Gas Co	Unit Sec. Twp. Rge.	Is gas actually connected?	nen		
	If well produces oil or liquids, give location of tanks.	7 11 31N 14W	37-			
		<u> </u>	No No			
		th that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.		
	Designate Type of Completic	on - (X)	;			
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded		29221	2860 *		
	1-5-73	2-22-73 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)		26861	2818'		
	5781' GL, 5795' KB	Dakota		Depth Casing Shoe		
	Perforations 2686-90', 269	94-99', 2724-29', 2734-38	) , !	29221		
	2746-53, 2770	0-77', 2785-88', 2812-17'	CEMENTING RECORD			
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	HOLE SIZE		2991	225 sx		
	12-1/4"	8-5/8" 5-1/2"	2922 '	500 sx		
	7-7/8*	2-3/8"	28181			
		2-3/8	2010			
			for an analysis of land of	land must be equal to or exceed top allow-		
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed able for this depth or be for full 24 hours)						
	OIL WELL	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)		
	Date First New Oil Run To Tanks  C. 2-18-73	2_10_72	Pumping			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	-		25 paig	None		
	120 hr. Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas-MCF		
		18 BOPD	11.4 BWPD	22 MCFD		
	90 BO & 57 BW	16 8012				
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Gandensale 011		
	Actual Flod. 1881-Mol./D	•		50.9°		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	reating Method (prost, occa pro)					
		OIL CONSERVATION CO		ATION COMMISSION		
I hereby certify that the rules and regulations of the Oil Conservation  APPROVED FEB 27 19						
		APPROVED FEB 27 19/3 19				
		1	By Original Signed by Emery C. Arnold			
	Commission have been complied with and that the information great above is true and complete to the best of my knowledge and belief.  Original Signed by  J. ARNOLD SMELL  (Signature)		BY Uriginal Signed by	MINGEY OF MANUAL		
			בודה בודה בודה בודה	TITLE SUPERVISOR DIST. #3		
			This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	(0.8)	. •		tests taken on the west in accordance with Nobe 1111		



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