HO. OF LOPIES RECEIVED		! 4	4
DISTRIBUTION			
SANTA FE		1	
FILE		/	<u></u>
U.S.G.S.		<u> </u>	
LAND OFFICE			
TRANSPORTER	OIL	<u> </u>	
	GAS	$\perp L$	
OPERATOR		1	
SECTION OFFICE			1

NEW MEXICO OIL CONSERVATION COMMISSION Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator AMOCO PRODUCTION COMPANY Address 87401 501 Airport Drive, Farmington, New Mexico Other (Please explain) Reason(s) for filing (Check proper box) Change in Transporter of: Dry Gas Recompletion Condensate Casinahead Gas Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE.
| Wetl No. | Pool Name, including Formation Lease No. Kind of Lease Indian 14-20-604-78 State, Federal or Fee Ute Mountain Tribal "J" 4 Ute Dome Dakota Location 1850 Feet From The South Line and 1110 West Feet From The Unit Letter , NMPM, County Range 14W San Juan Township 31N Line of Section 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 Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas 🔃 💮 or Dry Gas 🕱 P. O. Box 990, Farmington, New Maxico
Is gas actually connected? | When El Paso Natural Gas Co. Pae. Sec. Twp. If well produces oil or liquids, give location of tanks. No If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back | Same Restv. Diff. Restv. New Well Workover Gas Well Oil Well Designate Type of Completion - (X) X Date Compl. Ready to Prod. Total Depth Date Spudded 2397' 24361 11-1-73 9-5-73 Tubing Depth Name of Producing Formation Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) 22841 2285' Dakota 5992' GL, 6004' KB Depth Casing Shoe 2436 2356-2368' & 2285-2304' x 2 SPF TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 200 8-5/8" 3251 8-5/8", 24# 5-1/2", 14# 12-1/4" 450 24361 7-7/8" (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 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump gae lift, etc.) Date First New Oil Run To Tanks Date of Test alvid Casing Pressure Tubing Pressure Length of Test Gas-Water - Bbls. Oil-Bbls. Actual Prod. During Test NOV 6 1973 OIL CON. COM. GAS WELL Gravity of Condensate Bbls. Condensate/MMSF Length of Test Actual Prod. Test-MCF/D 3 hr. 2486 Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) 0.750" 459 459 Back Pressure OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE 6 1973 I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. BY Original Signed by Emery C. Arnold TITLE SUPERVISOR DIST. #3 This form is to be filed in compliance with RULE 1104. Original Signed by If this is a request for allowable for a newly drilled or deepened J. ARNOLD SNELL well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. (Signature) All sections of this form must be filled out completely for allowable on new and recompleted wells. Area Engineer

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.

(Title)

(Date)

NOVEMBER 5, 1973