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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Amoco Production Company		Attention: Julie Acevedo	Well API No. 3004525351
Address P.O. Box 800 Denver Colorado 80201			
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>			
If change of operator give name and address of previous operator _____			

II. DESCRIPTION OF WELL AND LEASE

Lease Name Childers	Well No. 3	Pool Name, Including Formation Mesaverde, Blanco	Kind of Lease State, Federal or Fee Federal	Lease No. SF 078040
Location Unit Letter M 1060 Feet From The South Line and 1275 Feet From The West Line Section 3 Township 31N Range 11W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Pasa Natural Gas Company 2815665 419830	3535 E. 30th St. Farmington, N.M. 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge.
If this production is commingled with that from any other lease or pool, give commingling order number: 2119850 2815666		

IV. COMPLETION DATA

Designate Type of Completion - (X) Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v <input type="checkbox"/> Diff Res'v <input checked="" type="checkbox"/>			
Date Spudded 5/18/82	Date Compl. Ready to Prod. 8/14/93	Total Depth 7428' KB	P.B.T.D. 5961'
Elevations (DF, RKB, RT, GR, etc.) 6041' GR	Name of Producing Formation Mesaverde	Top Oil/Gas Pay 4324'	Tubing Depth 5052'
Perforations 4324' 5091' Mesaverde			Depth Casing Shoe
TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8" 36#	318" KB	285
8 3/4"	7" 23#	4941" KB	335
6 1/4"	4 1/2" 10.5 11.6#	7428" KB	290
	2 3/8"	5052'	

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 hours)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
GAS WELL			
Actual Prod. Test - MCF/D 259	Length of Test 24	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) flowing	Tubing Pressure (Shut-in) 301	Casing Pressure (Shut-in) 380	Choke Size 1.0

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby 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.

Signature **Julie L. Acevedo**
Printed Name **Julie L. Acevedo** Sr. Staff Assistant
Title
Date **9/2/93** Telephone No. **303-830-6003**

OIL CONSERVATION DIVISION

Date Approved **SEP 10 1993**

By **ORIGINAL SIGNED BY ERNIE BUSCH**

Title **DEPUTY OIL & GAS INSPECTOR, DIST. 3**

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.

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

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