Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Me Energy, Minerals and Natural Re.

Pepartment

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

•	7	O TRANS	SPORT OIL	AND NA	TURAL GA	AS				
. TO TRANSPORT OIL AND NATURAL GA							Well API No.			
Amoco Production	3004524592									
Address 1670 Broadway, P.	O. Box 800	. Denver	, Colorad	80201						
Reason(a) for Filing (Check proper			<u> </u>		r (Please expl	zin)				
New Well		Change in Tra	. (-1							
tecompletion	Oil	L Dr								
hange in Operator 28 change of operator give name		Gas Co								
d address of previous operator	Tenneco Oi	1 E & P,	6162 S.	Willow,	Englewoo	d, Colo	rado 80	0155		
L DESCRIPTION OF W	TELL AND LEA	SE								
_ease Name NEWBERRY A Well No. Pool Name, Includ 4E BASIN (DAK)				-		CEDE	FEDERAL		Lease No. SF078146	
NEWBERRY A		4E BA	DAKO	<u> </u>		FEDE	NAL	3107	0140	
ocation H	17	10	FN et From The	L	910	r.	et From The	FEL	Line	
Section 34	Township 32N	Ra	inge ^{12W}	, NI	MPM,	SAN J	UAN		County	
II. DESIGNATION OF	TD A NICDANTE	D OE OH	AND NATE	DAT CAS						
lame of Authorized Transporter of		or Condensate		Address (Giv	e address to w	tich approved	copy of this j	orm is to be se	nt)	
CST	السنا									
lame of Authorized Transporter of		or	Dry Gas X		e address to w				nt)	
EL PASO NATURAL GA		Sec. Tv	vo l Roe	P. O. BOX 1492, Ellis gas actually connected?			EL PASO, TX 79978 When?			
ive location of tanks.	1 1	1	-γ. Ng∞. 	to Bas access	,	i				
this production is commingled w	ith that from any oth	er lease or poo	l, give commingl	ing order num	ber:					
V. COMPLETION DAT	A			,	,				- Loca -	
Designate Type of Com	letion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Hack	Same Res'v	Diff Res'v	
Date Spudded		N. Ready to Pr	_l od.	Total Depth	!	1	P.B.T.D.	.i	_1	
	'	•		·						
levations (DF, RKB, RT, GR, etc) Name of P	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
erforations				L			Depth Casi	ng Shoe		
erroranous							Joepan Cam			
		UBING, C	ASING AND	СЕМЕНТІ	NG RECOR	D				
HOLE SIZE		CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
···· ··· · · · · · · · · · · · · · · ·										
TEST DATA AND RE				J						
IL WELL (Test must b	e after recovery of to	otal volume of l	load oil and must					for full 24 hou	rs.)	
Tate First New Oil Run To Tank Date of Test				Producing Method (Flow, pump, gas lys, etc.)						
ength of Test	Tuhing Pre	Tubing Pressure			Casing Pressure			Choke Size		
Angul of 102	1.001.16	Taking Licearity								
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbls.			Gas- MCF		
				1			J			
GAS WELL				150 1211			TESTURE A	Cartarata		
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate			
esting Method (pitot, back pr.)	Tubing Pro	Tubing Pressure (Shut in)			Casing Pressure (Shut-in)			Choke Size		
I. OPERATOR CER	LIFICATE OF	COMPL	IANCE			ICEDV	ATION	DIVICIO	NI.	
I hereby certify that the rules a	••			'		ADEU A	AHON	DIVISIO	אוע	
Division have been complied v is true and complete to the bes			above	1			1814 6 41			
	1			Date	Approve	edN	MY-08	ińsa		
4. 7. M	umpton	レ'		D.		3	d			
Signature			C	∥ By_				~~~		
J. L. Hampton	Sr. Staf	1	itle	Title	;	SUPERVI	SION DI.	STRICT #	3	
Janaury 16, 1989		303-83								
Date		Teleph	one No.	11						

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