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

State of Fiew Mexico Energy, Minerals and Natural Resources Department

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

DISTRICE II P.O. Drawer DD, Antesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azicc, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

•	TO TR	ANSPO	PRT OIL	TAN DNA	URAL GA		ng mara			``	
Operator Among Dynadustion Co					Well API No.						
Amoco Production Co.					30@-045-27941						
	r, CO 80201										
P. O. Box 800, Denve Reason(6) for Filing (Check proper box)	1, 60 00201	- <del></del>		Othe	r (Please expla	in)					
New Well	Change	in Transpor	ter of:								
Recompletion	oii [	Dry Gag									
Change in Operator	Casinghead Gas	Condens	sate [_]								
change of operator give name											
nd address of previous operator							<del></del>				
I. DESCRIPTION OF WELL	AND LEASE										
Lease Name Well No. Pool Name, Includin				· · · · · · · · · · · · · · · · · · ·				Lease		Lease No.	
· · · · · · · · · · · · · · · · · · ·				itland Coal Gas				ederal XX XX	NM-(	NM-010989	
ocation F	101 /80010				/ č	55 0/E					
Unit Letter	; <u>1840 '</u>	Feet Fre	om The	N Line	and205	50'	_ Feet	From The _	E	Line	
Section 29 Towns	իմթ 32N	Range	<u> 11W</u>	, NI	APM, S	San_Ju	an_			County	
II. DESIGNATION OF TRA			U NATU		e achiress to w	hick acces	aved -	ony of this f	orm ie to ha -	ent)	
Name of Authorized Transporter of Oil	or Cond	icit24(C		LUCION (CIN	E33 10 W	шен аррес	vreu C	ין מחז נט קיקט.	orm Prin ne 20	·····/	
Name of Authorized Transporter of Casi	inchead Cas ( TT)	or Day (	Gas (V)	Address (Giv	e address to	hich arms	oved a	ony of this f	orne is to be s	eni)	
Amoco Production Co.		thead Gas [ or Diy Gas [X]		P. O. Box 800, Denver							
If well produces oil or liquids,	Unit Sec.	Twp.	Rue	ls gas actually		,	then 7				
ive location of tanks.		1	1		,	"	•• •				
this production is commingled with the	it from any other lease	or pool, give	c comminet	ing order numb	oer:	1					
V. COMPLETION DATA		1 2001 81.0		p							
	loit w	cii l c	Jas Well	New Well	Workover	Deepe	en l	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		0	χ	, v		1	- 1	0	1	1	
Date Spudded	Date Compl. Ready	to Prod.		Total Depth	J		ار	P.B.T.D.	J	_1	
11/4/90	12/20/90	· ·			1						
Hevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation			3443 ' Top Oil/Gas l'ay			Tubing Depth			
6578' GR	Fruitland Coal				3024'			3025			
Perforations				JUE 7				Depth Casing Shoe			
See Attached			;					•	-		
	THRING	G. CASIN	NG AND	CEMEN'TH	NG RECOR	RD	!				
HOLE SIZE		CASING & TUBING SIZE			CEMENTING RECORD DEPTH SET			SACKS CEMENT			
12-1/4"		9-5/8"			278'			200 sx Cl B ashgrove			
8-7/8"		5-1/2" 2-3/8"			3442'			245 sx Cl B ashgrove			
					3025"			(1st Stage) 245 sx Cl			
								w/ 200 sx, 65/35 poz t			
V. TEST DATA AND REQU	EST FOR ALLOV	VABLE		(2	nd Stq)	454 s	x C				
OIL WELL (Test must be after	r recovery of total volu	ne of load a	oil and must	be equal to or	exceed top all	lowable for	r this	depth or be	for full 24 had	urs.)	
Date First New Oil Run To Tank	Date of Test			Producing M	ethod (Flow, p	ump, ga	tett et	PIGE	IVE		
			-			9 i- 1	1				
Length of Test	Tubing Pressure			Casing Press	nic		W	Choke Size	1001	marke	
					.,			MAR 0	[ 1331		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbls.			OIL"CON. DIV.			
		·		<u> </u>				F CO		, • 	
GAS WELL								/DI2	1.5		
Actual Prod. Test - MCI/D	Length of Test			Ibls. Conder	sate/MMCF			Gravity of	Condensate (	<del> </del>	
320	24	24 Tubing Pressure (Shut-in)		n					,	1	
Festing Method (pitot, back pr.)	Tubing Pressure (S	hut-in)		Casing Pressure (Shut-in)				Choke Size	· · · · · · · · · · · · · · · · · · ·		
Flowing	200	200			340				24/64	٠,	
VI. OPERATOR CERTIFI	CATE OF CON	APLIAN	ICE			· · · · · · · · · · · · · · · · · · ·				di -	
I hereby certify that the rules and re-			.00	(	OIL COI	NSEF	<b>NY</b> F	NOITA	DIVISION	NC	
Division have been complied with and that the information given above											
is true and complete to the best of my knowledge and belief.					Date Approved MAR 0 1 1991						
61/1				Dale	a whhioa	<del></del>				<del></del>	
SU Shaker					Original Signed by FDANK T (HAGE?						
Signature					By Original Signed by FRANK T. CHAPEZ						
D. W. Whaley, Staff Admin. Supervisor					CHE	DEDMICA	JP r	DISTRICT	# 3		
Printed Name		Title		Title	5UF	CUAID	) (\ L		<del>п</del> Ј		
2/1/91	(303) 830										
Date — Alm		Telephone 1	٧0,	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 a number, transporter, or other such changes.
   4) Separate Form C/104 must be filed for each pool in multiply completed wells.

Perl: 12/3/90
3024'-3027', W/8 JSPF, .5" diam., 24 shots open.
3061'-3069', W/8 JSPF, .5" diam., 64 shots open.
3168'-3182', W/8 JSPF, .5" diam. 112 shots open.
3186'-3192', W/8 JSPF, .5" diam., 48 shots open.
3227'-3233', W/8 JSPF, .5" diam., 48 shots open.
3260'-3272', W/8 JSPF, .5" diam., 48 shots open.
3260'-3272', W/8 JSPF, .5" diam., 96 shots open.
Frac: 12/4/90
Frac down casing with 224360 gal water, 16170# 40/70 brady sn, 145530# 20/40 brady sn, AIR 98BPM, AIR 2000psi.

Ħ