

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Superseding Old O-104 and O-1
Effective 1-1-65

DATE	
FILE	
CLASS	
AND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PROBATION OFFICE	

Operator Amoco Production Company	
Address P.O. Drawer "A", Levelland, Texas 79336	
Reason(s) for filing (Check proper box)	Other (Please explain) EFF - 4/11/79
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☒
Recompletion ☐	Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐	From: Amoco Production Company To: Gas Company of New Mexico

If change of ownership give name and address of previous owner

1. DESCRIPTION OF WELL AND LEASE

Lease Name Nellis Federal	Well No. 1	Pool Name, Including Formation Buffalo Penn Gas	Kind of Lease State, Federal or Fee Federal	Lease No. NMO77002
Location Unit Letter 0 ; 660 Feet From The South Line and 1980 Feet From The East Line of Section 5 Township 19-S Range 33-E, NMPM, Lea County				

2. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Amoco Production Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX 77001					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) First Int'l Bldg, Suite 1800, Dallas, TX					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 5	Twp. 19	Pge. 33	Is gas actually connected? Yes	When 1/15/62

If this production is commingled with that from any other lease or pool, give commingling order number:

3. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Stim. Res.	Full. Res.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

4. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead 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 Tanks	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	Length of Test	Lbbs. Condensate/MMCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

5. CERTIFICATE OF COMPLIANCE 1-Conoco

O+4-NMOCD,H 1-Rwa 1-Susp 1-Houston

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.

Ray Cox
Signature

Administrative Supervisor

April 26, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED **APR 30 1979**, 19

BY **Orig. Signed by
Jerry Sexton**
TITLE **Dist 1, Supv.**

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 fluid velocity tests taken on the well in accordance with RULE 111.

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

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