	NO C COPY PROBLEMEN	,	· - ,	· · · · · · · · · · · · · · · · · · ·
	DISTRE J'ION SANT' FE		ONSERVATION COMMISSIO . FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65
	J.S.G S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
	CANC OFF E			
	TRANSPORTER GAS		•	
	OPERATOR - CESICS			
1.	Amoco Production Company			
	BOX 68, HOBBS, N. M. 88240			
	Reason) for ling (Check proper box) New Well	Change in Transporter of:	Other (Please explain)	man Borp (Trucks)
	Hecom. lettor: Change in Ow urship	Oil Dry Ga Casinghead Gas Conder	is Eff- 8-1-7-	man Borp (Trucks) 4
	If change of comership give name and address coprevious owner		0-	
==	DESCRIPTION OF WELL AND	I FASE		
	Leans sine	Well No. Pool Name, Including F	//-	- I - I
	MELLIS FEDERAL	1 Buffalo Hm	VI = (3003	- 101100 N
	Unit Letter 0; 660 Feet From The DUTH Line and 1980 Feet From The EAST			
	Line of Certico 5 Township 19-S Range 33-E, NMPM, LEA County			
111.		TER OF OIL AND NATURAL GA		
	Amoco Production Compa	INY (TOKE)	Address (Give address to which approv	
	To Vind fred Transporter of Cas	singhead Gas Or Ory Gas	Address (Give address to which approv	
	2-Amoco-Production Company Sec. 1 Twp. Bge. Is gas actually connected? When the location of tanks.			
	If this production is commingled with that from any other lease or pool, give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff, Resty,
	Designate Type of Completic	<u>i</u> i	Maral Dank	P.B.T.D.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.1.D.
	Elevations (DT, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations		<u></u>	Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	-OLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow			
٧.	OII, WELL able for this depth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas it)	s, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bble.	Water - Bbls.	Gas - MCF
	GAS WELI Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Prod. 1881-MCF/D	South of Test		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

O+1 NAJOCC . It

1-050 1-050

1-50:0

1 RP4

1-6011060

I hereby certify that the rules and regulations of the Oil Conservation Commission gave been complied with and that the information given above is tr : and complete to the best of my knowledge and belief.

(Title)

(Date)

ADMINISTRATIVE ASSISTANT

APPROVED

OIL CONSERVATION COMMISSION

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 the deviation tests taken on the well in accordance with RULE 111.

tests taken on the well in accordance with RULE 111.

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

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.

Separate Forms C-104 must be filed for each pool in multiply