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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

Form O-104
Supersedes O-104 and O-104
Effective 1-1-85

Operator Amoco Production Company	
Address P. O. Box 68, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter oil: Oil ☐ Dry Gas ☐
Recompletion ☐	Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐	Other (Please explain) Request allowable to produce

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease name South Hobbs (GSA) Unit	Well No. Pool Name, including formation 157 Hobbs GSA	Kind of Lease State, Federal or Fee	State Lease No. A1212-1
Location SL/BHL Unit Letter D, 1245/1269 Feet From The North Line and 1245/1295 Feet From The West			
Line of Section 10 Township 19-S Range 38-E, N.M.P.M., Lea County			

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Shell Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1008, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Phillips Petroleum Company GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79761
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. D 10 19-S 38-E	Is gas actually connected? When Yes 12-15-83

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Resrv. Diff. Res. ☐
Date Spudded 11-19-83	Date Compl. Ready to Prod. 12-15-83	Total Depth 4301'		P.B.T.D. 4258'			
Elevations (D.F., R.R.D., RT, GR, etc.) 3605.7' GL	Name of Producing Formation Grayburg San Andres	Top Oil/Gas Pay 4140'		Tubing Depth 4218'			
Perforations 4140'-56', 63'-66', 69'-71', 81'-83', 92'-4208', 11'-13', and 22'-24'				Depth Casing Shoe 4301'			
TUBING, CASING, AND CEMENTING RECORD W/4 SPF							
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 1524'		SACKS CEMENT 875 SX CT C		
7-7/8"	5-1/2"		4301'		1300 SX CT C neat		
	2-7/8"		4218'				

IV. 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 Tanks 12-13-83	Date of Test 12-15-83	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 96 BO, 269 BW, 41 MCFD	Oil - Bbls. 96	Water - Bbls. 269	Gas - MCF 41

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, suck pr.)	Testing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

V. CERTIFICATE OF COMPLIANCE

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.

Cathy L. Forman
Assist. Admin. Analyst

12-19-83

O+5-NMOCD, H T-R.E.Ogden, HOU T-Texaco T-CLF

OIL CONSERVATION COMMISSION

APPROVED **DEC 22 1983**, 19

BY **ORIGINAL SIGNED BY JERRY SIXTON**

TITLE **DISTRICT SUPERVISOR**

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 deviated 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.

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