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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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JUL 21 1981

Operator
Amoco Production Company

Address
Amoco Production Company P.O. Box 1183 Houston, TX

Reason(s) for filing (Check proper box)
 New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

I. DESCRIPTION OF WELL AND LEASE

R-7307 6/14/83

Lease Name Teledyne 20 Gas Com.	Well No. 1	Pool Name, including Formation LAGUNA SALADO Und. Atoka GAS	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter C ; 660 Feet From The North Line and 2080 Feet From The West Line of Section 20 Township 23-S Range 29-E , NMPM, Eddy County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Corporation	P. O. Box 1183, Houston, TX
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	P. O. Box 1492, El Paso, TX 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	C 20 23 29 No Yes 8-20-81

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
		X				X		X
Date Spudded 7-5-80	Date Compl. Ready to Prod. 6-24-81	Total Depth 13370	P.B.T.D. 12215					
Elevations (DF, RKB, RT, GR, etc.) 2936.3' GL	Name of Producing Formation Und. Atoka	Top Oil/Gas Pay 12040	Tubing Depth 2246 11943					
Perforations 12040'-12060' w/4 JSPF			Depth Casing Shoe 13367					

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
20"	16"	399'	500 Class C
14-3/4"	10-3/4"	2698'	1625 Lite, 200 Incor.
9-1/2"	7-5/8"	10488'	1300 Lite, 1000 Class H
6-1/2"	5"	9982'-13367'	450 Class H

V. 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	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 1200	Length of Test 24 hr.	Bbls. Condensate/MMCF 1	Gravity of Condensate
Testing Method (pilot, back pr.) Flow	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 18/64"

VI. CERTIFICATE OF COMPLIANCE O+4-NMOCD, H
1-Hou 1-W. Stafford, Hou 1-GPM

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.

Greg Mitchell
(Signature)
Admin. Analyst
(Title)
7-16-81
(Date)

OIL CONSERVATION COMMISSION
AUG 24 1981

APPROVED _____, 19____
BY *W.A. Gussert*
TITLE **SUPERVISOR, DISTRICT II**

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.
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 completed wells.