١	NO. OF COPIES RECEIVED			
Ì	DISTRIBUTION	NEW MEXICO OIL CO	DISERVATION COMMISSION	Form C+104
	SANTA FE /	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110		
	FILE /	AND Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATUR	AL GAS
	OIL /			LIVE Y
	TRANSPORTER GAS 1			
	OPERATOR /			197 4
1.	PRORATION OFFICE			OIL CON. COM
	AMOCO PRODUCTION COMPANY OIL CON. 3			
	AMOCO PRODUCTION COMPANY			
	501 Airport Drive, Farmington, New Mexico 87401			
	Reason(s) for filing (Check proper box)		Other (Please explain)
	New Well	Change in Transporter of:		
	Recompletion	Oil Dry Gas	. X	
	Change in Ownership	Casinghead Gas Condens	sate	
	If change of ownership give name			
	and address of previous owner			
	DESCRIPTION OF WELL AND I	FASE		
11.	Lease Name	Well No. Pool Name, Including Fo	rmation Kind o	Lease Federal Lease No.
	Jicarilla Contract 146	19 Basin Dakota	State,	Federal or Fee Jic. Contract 146
	Location			
	Unit Letter 🔼 ; 99	Feet From The North Line	and 1070 Feet	From The Rast
			. TT	Die Amelha
	Line of Section 4 Tow	nship 25-N Range 5	, NMPM,	Rio Arriba County
П	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S	
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which	approved copy of this form is to be sent)
	Plateau, Inc.			mington, New Mexico 87401
	Name of Authorized Transporter of Cas	i	1	approved copy of this form is to be sent)
	Northwest Pipeline Corp		Is gas actually connected?	Farmington, New Mexico 87401
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Yes	11-26-69
	<u> </u>	, , , , , , , , , , , , , , , , , , , ,		
	If this production is commingled with COMPLETION DATA	n that from any other lease or pool, g	give comminging order number	
. v .		Oil Well Gas Well	New Well Workover Deep	pen Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completio		1	1
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	CL W OF BUD BT CD	Name of Producing Formation	Top Off/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing : Simulion	105 311, 345 1 4,	
	Perforations			Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
v	EST 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.	OIL WELL	able for this dep	pth or be for full 24 hours)	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	gas tiji, etc.)
		Tubing Pressure	Casing Pressure	Choke Size
	Length of Test	Tubing Pressure		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
	·			
	GAS WELL		Table 2	Gravity of Condensate
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity or condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	lesting Method (publ., buck pri)			
***	CERTIFICATE OF COMPLIANCE	T. F.	OIL CONS	ERVATION COMMISSION
¥ 1.	CERTIFICATE OF COMPETANCE			FEB 7 19/4
	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.		APPROVED	, 19
			By Original Signed by A. R. Kendrick	
			PETROLE	UM ENGINEER DIST NO 3
			TITLE	
	Original Signed by		This form is to be fil	ed in compliance with RULE 1104.
	G. L. HAMILTON		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.	
	(Signature) Area Administrative Supervisor			
	Area Administrat		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
	December 28, 1973 (Date)		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	
.			Separate Forms C-10	. must be inted for each poor in managery