

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator
Amoco Production Company

Address
501 Airport Drive, Farmington, NM 87401

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

Other (Please explain)

OCT 1 1990
OIL CON. DIV.
DIST. 3

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla Contract 147	Well No. 9E	Pool Name, including Formation Undesignated Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. J.C. 147
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Location
Unit Letter 0 : 910 Feet From The South Line and 1740 Feet From The East
Line of Section 7 Township 25N Range 5W, NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Plateau Inc. - Dan Energy	Address (Give address to which approved copy of this form is to be sent) P. O. Box 489, Bloomfield, NM 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1899, Bloomfield, NM 87413

If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 7	Twp. 25N	Rge. 5W	Is gas actually connected? No	When
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If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

IV. CERTIFICATE OF COMPLIANCE

hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Original Signed By B.D. Scha
(Signature)
District Administrative Supervisor
(Title)
January 7, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____
BY _____
TITLE _____

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
			X	X					
Date Spudded 10/3/83	Date Compl. Ready to Prod. 11/4/83		Total Depth 7360'		P.B.T.D. 7230'				
Elevations (DF, RKB, RT, CR, etc.) 6677' KB	Name of Producing Formation Gallup		Top Oil/Gas Pay 6124'		Tubing Depth 7180' 7/11/83				
Perforations 6124'-6222', 6286'-6370', 1jsp2f, 38" total, 93 holes					Depth Casing Shoe 7360'				

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8" 24# K-55	310'	350
7.875"	5-1/2" 15.5# K-55	7360'	1760
	2-3/8"	7180'	

TEST DATA AND REQUEST FOR ALLOWABLE (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)

First New Oil Run To Tanks 11-8-83	Date of Test 12-18-83	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 10 hr.	Tubing Pressure 45 psig flowing	Casing Pressure 200 psig	Choke Size 12/64
Initial Prod. During Test	Oil - Bbls. 0	Water - Bbls. 0	Gas - MCF 58

Oil Well		40	
Initial Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size