STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

. ** *** ***			
DISTRIBUTI		T	
BANTA FE			1
PILE	1		
U.S.O.A.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	SI OKT OIL AND NATURAL GAS							
Operator								
Amoco Production Co.	^							
Address	The first of the second							
501 Airport Drive, Farmington, N M	87401							
Reason(s) for filing (Check proper box)	Other (Please explain)							
X New Well Change in Transporter of:	JUE 12 in fill							
Recompletion Oil	Ary Gas 1985							
Change in Ownership Casinghead Gas	Ory Gas Condensate							
If change of ownership give name and address of previous owner								
II. DESCRIPTION OF WELL AND LEASE								
Lease Name Well No. Pool Name, Including F	ormation Kind of Lease Lease No.							
Fred Phillips G 1A Blanco Mesa	State Federal or Fee							
Location	verde Sdd., rederd or Federal NM 01139							
Unit Letter A : 800 Feet From The North Li	ne and <u>820</u> Feet From The East							
Line of Section 10 Township 25N Range	3W , NMPM, Rio Arriba County							
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL								
Name of Authorized Transporter of Cil or Condensate	Address (Give address to which approved copy of this form is to be sent)							
Permian Corporation	P.O. Box 1702 Farmington, NM 87499							
Name of Authorized Transported of Costing head Gas or Dry Gas S	Address (Give address to which approved copy of this form is to be sent)							
Nerchwest Pipeline Componential	P.O. Box 990 Farmington, NM 87499							
If well produces oil or liquids, Unit Sec. Twp. Reg.								
	No							
If this production is commingled with that from any other lease or pool,	give commingling order number: $R - 7651$							
NOTE: Complete Parts IV and V on reverse side if necessary.								
	OU COMOTO VATION DU VOITA							
VI. CERTIFICATE OF COMPLIANCE	7-10-55 OIL CONSERVATION DIVISION							
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED JUL 1365							
been complied with and that the information given is true and complete to the best of	Original Signed by FRANK T. CHAVEZ							
my knowledge and belief.	(B1							
$R \setminus C \setminus A$	SUPERVISOR DISTRICT # 3							
SUSNaw								
Adm. Supervisor	This form is to be filed in compliance with RULE 1104.							
(Signature) 7-9-85	If this is a request for allowable for a newly drilled or despensed well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with mugg tit.							
(Tille)	All sections of this form must be filled out completely for allowable on new and recompleted wells.							
(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 completed wells.							

IV. COMPLETION DATA					_					
Designate Type of Comple	tion = (X)	Oll Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Dill. Res	
Date Spudded	I Data Carrel	XX	 _	X	1		1	1	!	
12-10-85	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.	2-26-85			<u> </u>			8302'			
	Name of Producing Formation			Top Oll/Gas Pay			Tubing Depth			
7210'GR	Mesaverde			5866'			8135'			
5866'-5936'					Depth Casir		 -			
					835	-				
		TUBING,	CASING, AN	CEMENTI	AC BECORE	· · · · · · · · · · · · · · · · · · ·	1. 03-)		
HOLE SIZE		G & TUBIA		DECOMMENT						
12-1/4"	9-5/8'	'',36#,	K55			·	SACKS CEMENT			
8-3/4"	5-1/2'	17#,	K.5.5	358' 8356'3			354 cf			
		-3/8"		1	<i>330 .</i> √ 135'		-1 31	71 cf		
		<u> </u>		 	135					
. TEST DATA AND REQUEST OIL WELL Date First New Cil Hun To Tonke	FOR ALLOW	VABLE (T	est must be a ble for this de					ual to or exce	ed top allo	
	Į.			Producing Method (Flow, pump, gas lift, etc.)						
ength of Test	Tubing Pressu	W.e		Casing Preseure			Choke Size			
atual Prod. During Test	 						1			
Qual Prod. During Test Oil-Bbis.			Water - Bbls.			Gas-MCF				
AS WELL		· · · · · · · · · · · · · · · · · · ·			 ,-,-,		 			
ctual Prod. Test-MCF/D	Length of Test	t		Bbls. Condensate/MMCF			10			
no flow	3	hrs					Gravity of Co	naensate		
reling Method (pitot, back pr.)	Tubing Preseu	(Shut-i	<u> </u>	Casina Press	ura / Ehnt-1:		6) . 5			
back pressure	1	2010	· .	Casing Pressure (Shut-in)			Choke Size			

back pressure