

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator ANOCO PRODUCTION COMPANY		Well API No. 300390623100
Address P.O. BOX 800, DENVER, COLORADO 80201		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input checked="" type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name JICARILLA CONTRACT 155	Well No. 12	Pool Name, Including Formation BLANCO P.C. SOUTH (GAS)	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter K	1700	FSL	1850	FWL
Section 32	Township 26N	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"/>	Address (Give address to which approved copy of this form is to be sent)
GARY WILLIAMS ENERGY CORPORATION	P.O. BOX 159, BLOOMFIELD, NM 87413
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)
NORTHWEST PIPELINE CORPORATION	P.O. BOX 8900, SALT LAKE CITY, UT 84108-0899
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When?

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

RECEIVED
JUL 2 1990

GAS WELL

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

OIL CON. DIV.
DIST. 3

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

D. W. Whaley

Signature
Doug W. Whaley, Staff Admin. Supervisor

Printed Name Title

Date June 25, 1990 Telephone No. 303-830-4280

OIL CONSERVATION DIVISION

Date Approved JUL 2 1990

By *Samuel Chang*
SUPERVISOR DISTRICT #3

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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Lease Name JICARILLA CONTRACT 155	Well No. 12	Pool Name, including Formation BASIN DAKOTA (PRORATED GAS)	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter K	1700	Feet From The FSL	Line and 1850	Feet From The FWL
Section 32	Township 26N	Range 5W	NMPM,	RIO ARRIBA
County				

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	Twp.	Rge.
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Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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GAS WELL

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

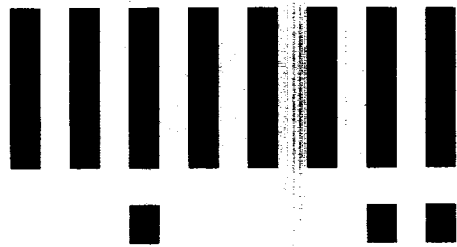
Signature
Doug W. Whaley, Staff Admin. Supervisor
Printed Name
June 25, 1990
Date
303-830-4280
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 2 1990
By
SUPERVISOR DISTRICT #3
Title

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LTR



Job separation sheet

OIL CONSERVATION DIVISION

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Operator: AMOCO PRODUCTION COMPANY Lease/Well #: JIC CONTRACT 155 12

Location of Well: K322605 Meter #: 86409 RTU: 1-146-01 County: RIO ARRI

	NAME RESERVOIR OR POOL	TYPE PROD	METHOD PROD	MEDIUM PROD
UPR COMP	SO BLANCO PICTURED CLIFF 86620 147-1	GAS	FLOW	CSG
LWR COMP	BASIN DAKOTA 86409 146-1	GAS	FLOW	TBG

PRE-FLOW SHUT-IN PRESSURE DATA

	Hour/Date Shut-In	Length of Time Shut-In	SI Press. PSIG	Stabilized
UPR COMP	11/19/90	72 Hours	332	yes
LWR COMP	11/19/90	72 Hours	914	yes

FLOW TEST DATE NO.1

Commenced at (hour,date)*				Zone Producing (Upr/Lwr)	
TIME (hour, date)	LAPSED TIME SINCE*	PRESSURE		Prod Temp.	REMARKS
		Upper	Lower		
11/19/90	Day 1	332	476		Both Zones SI
11/20/90	Day 2	334	758		Both Zones SI
11/21/90	Day 3	274	832		Both Zones SI
11/22/90	Day 4	332	451		flowed lower zone
11/23/90	Day 5	332	376		"
11/24/90	Day 6	332	376		"

Production rate during test

Oil: _____ BOPD based on _____ BBLs in _____ Hrs _____ Grav _____ GOR _____

Gas: _____ MFCPD: Tested thru (Orifice or Meter) _____

MID-TEST SHUT-IN PRESSURE DATA

	Hour, Date SI	Length of Time SI	SI Press. PSIG	Stabilized (yes/no)
UPR COMP				
LWR COMP				

DEC 13 1990
OIL CON. DIV.
DIST. 3

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Page 2

FLOW TEST NO. 2

Commenced at (hour, date) **		Zone producing (Upper or Lower):			
TIME (hour, date)	LAPSED TIME SINCE **	PRESSURE		PROD. ZONE TEMP.	REMARKS
		Upper Completion	Lower Completion		

Production rate during test

Oil: _____ BOPD based on _____ Bbls. in _____ Hours. _____ Grav. _____ GOR _____

Gas: _____ MCFPD: Tested thru (Orifice or Meter): _____

Remarks: _____

I hereby certify that the information herein contained is true and complete to the best of my knowledge.

Approved DEC 13 1990 19 _____
 New Mexico Oil Conservation Division

Original Signed by CHARLES GHOLSON

By _____

Title DEPUTY OIL & GAS INSPECTOR, DIST. #2Operator Quince Prod.By MallasTitle field techDate 12/12/90

NORTHWEST NEW MEXICO PACKER LEAKAGE TEST INSTRUCTIONS

1. A packer leakage test shall be commenced on each multiply completed well within seven days after actual completion of the well, and annually thereafter as prescribed by the order authorizing the multiple completion. Such tests shall also be commenced on all multiple completions within seven days following recompletion and/or chemical or fracture treatment, and whenever remedial work has been done on a well during which the packer or the tubing have been disturbed. Tests shall also be taken at any time that communication is suspected or when requested by the Division.

2. At least 72 hours prior to the commencement of any packer leakage test, the operator shall notify the Division in writing of the exact time the test is to be commenced. Offset operators shall also be so notified.

3. The packer leakage test shall commence when both zones of the dual completion are shut-in for pressure stabilization. Both zones shall remain shut-in until the well-head pressure in each has stabilized; provided however, that they need not remain shut-in more than seven days.

4. For Flow Test No. 1, one zone of the dual completion shall be produced at the normal rate of production while the other zone remains shut-in. Such test shall be continued for seven days in the case of a gas well and for 24 hours in the case of an oil well. Note: if, on an initial packer leakage test, a gas well is being flowed to the atmosphere due to the lack of a pipeline connection the flow period shall be three hours.

5. Following completion of Flow Test No. 1, the well shall again be shut-in in preparation for Flow Test No. 2.

that the previously produced zone shall remain shut-in while the zone which was previously shut-in is produced.

7. Pressures for gas-zone tests must be measured on each zone with a deadweight pressure gauge at time intervals as follows: 3 hours tests: immediately prior to the beginning of each flow-period, at fifteen-minute intervals during the first hour thereof, and at hourly intervals thereafter, including one pressure measurement immediately prior to the conclusion of each flow period. 7-day tests: immediately prior to the beginning of each flow period, at least one time during each flow period (at approximately the midway point) and immediately prior to the conclusion of each flow period. Other pressures may be taken as desired, or may be requested on wells which have previously shown questionable test data.

24-hour oil zone tests: all pressures, throughout the entire test, shall be continuously measured and recorded with recording pressure gauges the accuracy of which must be checked at least twice, once at the beginning and once at the end of each test, with a deadweight pressure gauge. If a well is a gas-oil or an oil-gas dual completion, the recording gauge shall be required on the oil zone only, with deadweight pressures as required above being taken on the gas zone.

8. The results of the above-described tests shall be filed in triplicate within 15 days after completion of the test. Tests shall be filed with the Aztec District Office of the New Mexico Oil Conservation Division on Northwest New Mexico Packer Leakage Test Form Revised 10-27-77.