

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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

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

3039/N
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JUL 16 1987
OIL CON. DIV.
DIST. 3

I. Operator
Amoco Production Company

Address
2325 East 30th Street; Farmington, NM 87401

Reason(s) for filing (Check proper box)

☒ New Well	Change in Transporter of:
☐ Recompletion	☐ Oil ☐ Dry Gas
☐ Change in Ownership	☐ Casinghead Gas ☐ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Seifert Gas Com A	Well No. 1	Pool Name, including Formation Gavilan Mancos Ext.	Kind of Lease State, Federal or Fee	Lease No. Fee
Location				
Unit Letter <u>P</u> : <u>940</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>East</u>				
Line of Section <u>22</u> Township <u>26N</u> Range <u>2W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1702 - Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Caller Service 4990 - Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit : <u>P</u> Sec. : <u>22</u> Twp. : <u>26N</u> Rge. : <u>2W</u>
Is gas actually connected?	When <u>No</u>

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.

VI. 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 is true and complete to the best of my knowledge and belief.

BDS Shaw
(Signature)

Adm. Supervisor

(Title)

July 10, 1987

(Date)

OIL CONSERVATION DIVISION

APPROVED

JUL 16 1987

Original Signed by FRANK T. CHAVEZ

BY

SUPERVISOR DISTRICT # 3

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	Some Res'v.	Diff. Res'v.
Date Spudded	10-25-86								
Date Compl. Ready to Prod.	06-28-87								
Total Depth	8533'								
P.B.T.D.	8235'								
Elevations (D.F., R.K.B., RT, CR, etc.)	GR 7562'								
Name of Producing Formation	Gavilan Mancos								
Top Oil/Gas Pay	7124'								
Tubing Depth	7725'								
Depth Casing Shoe	7124' - 7330', 7330' - 7420', 7692' - 7708'								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT	
12-1/4"	36# K55 9 5/8	303'	177 cF				
7-7/8"	17# 15.5# K55 5 7/8	8533'	1357 cF				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks	01-06-87	Date of Test	06-19-87	Producing Method (Flow, pump, gas lift, etc.)			
Length of Test	24 hours	Tubing Pressure	250	Casing Pressure	275	Choke Size	---
Actual Prod. During Test	Oil-Bbls. 54	Water-Bbls. 1	Gas-MCF 120				

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate	Sealing Method (Post test pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size
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