

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

3157/10

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

RECEIVED
NOV 16 1987
OIL CON. DIV
DIST. #3

Operator Amoco Production Company	
Address 2325 E. 30th Street, Farmington, NM 87401	
Reason(s) for listing (Check proper box)	Other (Please explain)
☒ New Well ☐ Recompletion ☐ Change in Ownership	Change in Transporter of: ☐ Oil ☐ Gas ☐ Dry Gas ☐ Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE				
Lease Name Jicarilla Apache A118	Well No. 24	Pool Name, including Formation NE Ojito Gallup Dakota	Kind of Lease State, Federal or Fee Fed	Lease No. JIC APACHE A 118
Location Unit Letter <u>H</u> : <u>1790</u> Feet From The <u>North</u> Line and <u>800</u> Feet From The <u>East</u> Line of Section <u>25</u> Township <u>26N</u> Range <u>3W</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 Oil	Address (Give address to which approved copy of this form is to be sent) P.O. 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 H	Sec. 25	Twp. 26N	Range 3W	Is gas actually connected? No	When

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.	
<u>BDS Shaw</u> (Signature) Administrative Supervisor (Title) November 16, 1987 (Date)	

OIL CONSERVATION DIVISION	
APPROVED	NOV 16 1987
BY <u>Charles Sholen</u>	
DEPUTY OIL & GAS INSPECTOR, DIST. #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 deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.	
All sections of this form must be filled out completely for all wells on new and recompleted wells.	
Fill out only Sections I, II, III, and VI for changes of own name or number, or transporter, or other such change of condition.	
Separate Forms C-104 must be filed for each pool in multi-completed wells.	

CONFIDENTIAL

IV. COMPLETION DATA

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Res'v.	Diff. Res'v.
		X		X					
Date Spudded 06/26/87	Date Compl. Ready to Prod. 09/20/87		Total Depth 8496'			P.B.T.D. 8397'			
Elevations (DF, RKB, RT, CR, etc.) 7527' GR	Name of Producing Formation Gallup-Dakota		Top Oil/Gas Pay 7222'			Tubing Depth 7340'			
Perforations 8194'-8216' 8238'-8262' 7396'-7496' 7222'-7296'						Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8" 36# K55	357'	224 cf
7 7/8"	5 1/2" 17# 15.5#	8483'	2111 cf
	N80 K55		
	2 7/8" 7340'		

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks 09/20/87	Date of Test 09/20/87	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hr.	Tubing Pressure 125	Casing Pressure 125	Choke Size
Actual Prod. During Test	Oil - Bbls. 48	Water - Bbls. 46	Gas - MCF 43

GAS WELL

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