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

State of New Mexico Energy, Minerals and Natural Resources Department

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

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OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

perator					Well API No.			
AMOCO PRODUCTION COMPANY				300392419200				
Idress P.O. BOX 800, DENVER, C	OLORADO 8020	1						
eason(s) for Filing (Check proper box)			Other (Please	explain)				
ew Well		Transporter of:						
ecompletion		Dry Gas 📙						
lange in Operator	Casinghead Gas	Condensate X						
hange of operator give name								
DESCRIPTION OF WELL A	AND LEASE				Kind of Lease	lea	se No.	
ease Name BEAR CANYON UNIT	Well No.	Pool Name, Includin GAVILAN MA			State, Federal or Fee			
ocation L	1820	Feet From The	FSL Line and _	970	Feet From The	FWL	Line	
Unit Letter	.: 26N	2W	, NMPM,		RIO ARRIBA		County	
Section Township)	Range						
I. DESIGNATION OF TRANS	SPORTER OF O	IL AND NATU	1000000000	is to which a	pproved copy of this for	m is to be set	u)	
laine of Authorized Transporter of Oil GARY WILLIAMS ENERGY CO		<u> </u>	P.O. BOX 15	9, BLOC	OMFIELD, NM (<u>87413 </u>		
lame of Authorized Temenorier of Casine	chead Gas 🔀	or Dry Gas	P.O. ECX	800,	DONYCO, CC	508 C	01	
(well produces oil or liquids,	Unit Sec.	Twp. Rgc.	Is gas actually conne	cted?	When ?			
ive location of tanks. This production is commingled with that	from any other lease or	pool, give comming	ling order number:					
V. COMPLETION DATA			New Well Work	over I	Deepen Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X) Oil We	i	ii				1	
Date Spudded	Date Compl. Ready	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	uons (DF, RKB, RT, GR, etc.) Name of Producing Formation		Top Oil/Gas Pay		Tubing Dept	Tubing Depth		
Perforations		<u> </u>	<u> </u>		Depth Casin	g Shoe		
renorations		CACING AND	CEMENTING R	FCORD				
	CASING & TUBING SIZE		CEMENTING RECORD DEPTH SET		5	SACKS CEMENT		
HOLE SIZE	CASING &	TUBING SIZE	<u> </u>	11021				
			-					
V. TEST DATA AND REQUE	ST FOR ALLOV	VARI.E.	_1					
V. TEST DATA AND REQUE	W	1,1000	•		He for this death or he	for full 24 ho	urs.)	
OIL WELL (Test must be after	recovery of total volum	re of load oil and mu	Producing Method	d top allowa (Flow, pump	ble for this depth or be , gas lift, etc.)	for full 24 ho	urs.)	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test	re of load oil and mu	1700ucing Medico	d top allowa (Flow, pump			ws.)	
OIL WELL (Test must be after	recovery of total volum	ne of load oil and mu	Producing Method Casing Pressure	d top allowa (Flow, pump	Choke Size		urs.)	
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test	Date of Test	ne of load oil and mu	1700ucing Medico	cd top allowa (Flow, pump			urs.)	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test Tubing Pressure	ne of load oil and mu	Casing Pressure	d top allowa (Flow, pump	Choke Size		urs.)	
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	Date of Test Tubing Pressure Oil - Bbls.	ne of load oil and mu	Casing Pressure Water Rois	CE	Choke Size		urs.)	
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test	Date of Test Tubing Pressure Oil - Bbls.	e oj toda on ona ma	Casing Pressure Water Role Water Role Bbls. Concepted	CON.	Choke Size Choke Size Choke Size Choke Size	Condensate	urs.)	
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	Date of Test Tubing Pressure Oil - Bbls.	e oj toda on ona ma	Casing Pressure Water Rois	CON.	Choke Size Choke Size Choke Size Choke Size	Condensate	urs.)	
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFI	Date of Test Tubing Pressure Oil - Bbls. Length of Test Tubing Pressure (S	Shut-in) MPLIANCE	Casing Pressure Wate Pols. Bbls. Coograte/ Casing Pressure (S	GE 1 L1 1 19 CON. DIST. 3	Choke Size Choke Size Office Size Choke Size	Condensate		
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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
- 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.