

OIL CONSERVATION DIVISION

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

3014/R

DISTRICT II
P.O. Drawer 00, Artesia, NM 88210

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator <u>Amoco Production Co.</u>		Well API No. <u>30-039-24310</u>
Address <u>2325 E. 30th, Farmington, NM 87401</u>		
Reason(s) for Filing (Check proper box) ☒ Other (Please explain)		
New Well ☒	Change in Transporter of: Oil ☐ Dry Gas ☐	
Recompletion ☐	Casinghead Gas ☐ Condensate ☐	
Change in Operator ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Simmons Federal Com</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Cavilan Mancos Ext</u>	Kind of Lease <u>State (Federal) or Fee</u>	Lease No. <u>NM-69074</u>
Location Unit Letter <u>F</u> : <u>1750</u> Feet From The <u>N</u> Line and <u>2200</u> Feet From The <u>W</u> Line Section <u>3</u> Township <u>26N</u> Range <u>2W</u> <u>NMNM</u> <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ <u>Permian Corporation</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1702 Farmington NM 87499</u>	
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ <u>El Paso Natural Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>Caller Service 4990 " " "</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>F</u> Sec. <u>3</u> Twp. <u>26N</u> Rge. <u>2W</u>	Is gas actually connected? <u>No</u> When? <u>1-28-89</u>

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 Resv	Diff Resv
Date Spudded <u>11-4-88</u>	Date Compl. Ready to Prod. <u>1-4-89</u>	Total Depth <u>7600'</u>	P.B.T.D. <u>7546'</u>			
Elevations (D.F., RKB, RT, GR, etc.) <u>7256' Gr</u>	Name of Producing Formation <u>Cavilan Mancos</u>	Top Oil/Gas Pay <u>7134'</u>	Tubing Depth <u>7459'</u>			
Perforations <u>7134'-7240'</u> <u>7312'-7458'</u>		Depn Casing Shoe				
TUBING, CASING AND CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
<u>14-3/4"</u>	<u>10-3/4"</u>	<u>318'</u>	<u>310 sx</u>			
<u>9-7/8"</u>	<u>7-5/8"</u>	<u>6645'</u>	<u>850 sx, 500 sx</u>			
<u>6-3/4"</u>	<u>5" Liner</u>	<u>7594'</u>	<u>260 sx</u>			
	<u>2-7/8" Tbg</u>	<u>7459'</u>				

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 <u>1-14-89</u>	Date of Test <u>2-7-89</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pumping</u>	RECEIVED 50 FEB 08 1989 OIL CON. DIV DIST. 3
Length of Test <u>24 hr</u>	Tubing Pressure <u>160</u>	Casing Pressure <u>160</u>	
Actual Prod. During Test	Oil - Bbls. <u>172</u>	Water - Bbls. <u>5</u>	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate, NGL, etc.	Gravity of Condensate
Testing Method (prior, 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.

B D Shaw
Printed Name B D Shaw Admin. Supr.
Date 2-8-89 Telephone No. 505-325-8841

OIL CONSERVATION DIVISION

Date Approved APR 07 1988
By Original Signed by FRANK T. CHAVEZ
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.