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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-
Effective 1-1-65

OP
Amoco Production Company
501 Airport Drive Farmington, NM 87401

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	
Recompletion ☐	
Change in Ownership ☐	
Change in Transporter of:	
Oil ☐	Dry Gas ☐
Casinghead Gas ☐	Condensate ☒

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, including Formation	Kind of Lease
T. L. Rhodes "C"	NW 080844	3	Basin Dakota	State, Federal or Fee Federal
Location				
Unit Letter	1190	Feet From The	North	Line and
2180	Feet From The	East		
Line of Section	31	Township	28-N	Range
11-W	NMFM,	San Juan	County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Gary Energy Corp.	P. O. Box 489 Bloomfield, NM 87413
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	Box 990, Farmington, New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
8 31 28-N 11-W	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res.	Diff. Res.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
9-1-64	10-16-66	6570'	6534'					
Elevations (DF, RMB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6050' (RMB)	Dakota	6333'	6387'					
Perforations	Depth Casing Shoe							
6448-60', 6494-6506', 6370-6378', 6384-6402'	6570'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-3/8"	359'	225					
7-7/8"	4-1/8"	6570'	1350					
	2-3/8"	6387'						

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 all
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
3469	3 hr.		
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Back Pressure	440 psig	931 psig	3/4"

1. CERTIFICATE OF COMPLIANCE

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

BD Shaw

Signature

Admin. Supervisor

11-1-84

Date

OIL CONSERVATION COMMISSION

APPROVED

NOV 26 1984

BY

TITLE

This form is to be filed in compliance with RULE 1100,
If this is a request for allowable for a newly drilled or deepen
well, this form must be accompanied by a tabulation of the deviat-
ions taken on the well in accordance with Rule 111,
All sections of this form must be filled out completely for all
able on new and recompleted wells.
Fill out only Sections 1, 11, 111, and 1111 for changes of own-
ership, well name or number, or transportation of other such change of condi-
tion.
Separate Forms C-104 must be filed for each well in multi-
completed wells.