STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
BANTA PE			
FILE			
V.8.0.4.			
LAND OFFICE		1	
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

T AUTHORIA	ZATION TO TRANS	PORT OIL A	ND NATUR	AL GAS		
Operator						
Amoco Production Co.						
501 Airport Drive, Farmingtor	N M 87/01			BORIN	E W	
Reoson(s) for filing (Check proper box)	1, N II 07401	Or	her (Please	BALL OF EACH	" 	
· —	Transporter of:		•	N.		
Recompletion Oil	_ p	ry Gas		UU MAY 2 4 19'	8 2	
Change in Ownership Casing	phead Gas C	ondensate		. 11111	LVIC	
If change of ownership give name				OIL COM.	10: "	
and address of previous owner)	
H DESCRIPTION OF WELL AND LEASE						•
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. 1	Pool Name, Including F	ormation		Kind of Lease		Legge No.
Gallegos Canyon Unit 175E	Basin Dakota			State, Federal or Fee F_{ϵ}	ederal	ĪND-8471
Location			•			
Unit Letter M : 1190 Feet From	The South Lin	ne and11	90	Feet From The	West	
	_	10	10.450.4	G - T		County
Line of Section 25 Township 28N	Range	13W	, NMPM,	San Juan		County
III. DESIGNATION OF TRANSPORTER OF O	IT AND NATURA	I. GAS				
Name of Authorized Transporter of CII Gor Con	nd apage 10 187	Address (Gu	ve address to	o which approved copy of	this form is	to be sent)
Permian Corporation	Permian Corporation P.O. Box 1702, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Gi	ve address to	o which approved copy of	this form is	to be sent)
El Paso Natural Gas Company				Farmington, NM	87499	
If well produces oil or liquids, Unit Sec.	Twp. Rge.		illy connecte	ay _i when		
give location of tanks. M 25	28N 13W	1 NO	· · · · · · · · ·	 		
If this production is commingled with that from any	other lease or pool,	give commin	igling order	number:		•
NOTE: Complete Parts IV and V on reverse sid	de if necessary.					
ATT OF COMPLIANCE			OIL CO	DNSERVATION DIV	VISION	
VI. CERTIFICATE OF COMPLIANCE		6-10-85 JUN 1 0 1985 19				
I hereby certify that the rules and regulations of the Oil Cor	servation Division have	APPROV	/ED			
been complied with and that the information given is true and my knowledge and belief.	1 complete to the best of	BY		Original Signed by FF	ZANK I. CHI	\YL& .
1				 ··	ISOR DISTRIC	
O(1)		TITLE_				
KD Shaw				be filed in complianc		
(Signature)		If this is a request for allowable for a newly drilled or deepensed well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.				
Adm. Supervisor (Tille)		A11 .=	ections of	this form must be fille completed wells.		
5-21-85 (Date)		well name	e or number	ections I, II, III, and , or transporter, or othe	r auch chan	ge of condition.
		Sepa: completed		C-104 must be filed	for each i	ool in multiply

	Oil Weil Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Dill. Res'		
Designate Type of Complet	ion - (X)		1 1 1		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
3-16-85	4-3-85	63621	6316'		
Sievations (DF, RKB, RT, GR, etc.)		Top Oll/Gas Pay	Tubing Depth		
5957' GR	Dakota	6190'	6280'		
Perforations 6190'-6206', 6230'-6240', 6254-6276'			Depth Casing Shoe 6362 *		
	TUBING, CASING, A	ND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
12-1/4"	9-5/8", 36#, K55	330'	212 cf Class B		
8-3/4"	7", 23#, J55	6362'	1597 cf Class B		
	3/8	6280			
V. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tunks	FOR ALLOWABLE (Test must be able for this	e after recovery of total volume of load oil and must be equal to or exceed top a depth or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.)			
ength of Test	Tubing Pressure	Casing Presewe	Choke Size		
Actual Prod. During Test	Oil-Bbis.	Water - Bbis.	Gam-MCF		
AS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate		
2910	3 hrs				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
Back pressure	1058 psig	1065 psig	75"		

IV. COMPLETION DATA