

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

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JUL 29 1985

I. Operator  
Amoco Production Co.  
Address  
501 Airport Drive, Farmington, N M 87401  
Reason(s) for filing (Check proper box)  
☒ New Well  
☐ Recompletion  
☐ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gallegos Canyon Unit	Well No. 236E	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. 077966
Location Unit Letter <u>M</u> ; <u>1010</u> Feet From The <u>South</u> Line and <u>1190</u> Feet From The <u>West</u> Line of Section <u>14</u> Township <u>28N</u> Range <u>13W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Corporation	P.O. Box 1702, Farmington, N.M. 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 990, Farmington, N.M. 87499
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>M</u> Sec. <u>14</u> Twp. <u>28N</u> Rge. <u>13W</u>	No

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.

BDS Shaw

(Signature)

Adm. Supervisor

(Title)

7-23-85

(Date)

OIL CONSERVATION DIVISION

8-6-85  
APPROVED  
Original Signed by FRANK Y. CHAVEZ  
AUG 02 1985

TITLE SUPERVISOR DISTRICT # 2

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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## OIL CON. DIV.] DIST. 3

### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res.
			X	X					
Date Spudded 5-27-85	Date Compl. Ready to Prod. 7-2-85	Total Depth 6494'				P.B.T.D. 6454'			
Elevations (DF, RKB, RT, GR, etc.) 6012' GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 6296'				Tubing Depth 6410'			
Perforations 6296'-6308', 6356'-6400'						Depth Casing Shoe 6494'			

### TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8", 11.6#, K55	322'	325 cf
7-7/8"	4-1/2", 11.6#, K55	6494'	1853 cf
	2-3/8"	6410'	

### 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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble.	Water-Bble.	Gas-MCF

### GAS WELL

Actual Prod. Test-MCF/D 1628	Length of Test 3 hrs.	Bble. Condensate/MCF	Gravity of Condensate
Testing Method (psi, back pr.) Back pressure	Tubing Pressure (shut-in) 760 psig	Casing Pressure (shut-in) 1060 psig	Choke Size .75"