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Appropriate District Office
DISTRICT 1
P.O. Box 1980, 16:bbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

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

## **OIL CONSERVATION DIVISION**

DISTRICT II P.O. Drawer DD, Artesia, NM 88210	P.O. Box 2088 Santa Fe, New Mexico 87504-2088								
NSTRICT III OUD RIO Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION									
I. Operator	TO TRANSPORT OIL AND NATURAL GAS				Well A	Well API No.			
AMOCO PRODUCTION COMPA	NY				3004	45085850	00	·····	
P.O. BOX 800, DENVER,	COLORADO 80201				· · · · · · · · · · · · · · · · · · ·				
Reason(s) for Filing (Check proper box) New Well	Change in Tr	ansnorter of:	Othe	t (Please expi	lain)				
Recompletion	Oil D	ry Gas							
Change in Operator	Casinghead Gas C	ondensate X		····					
II. DESCRIPTION OF WELL AND LEASE									
Lease Name A L ELLIOTT A	Well No. Po				of Lease Lease No. Federal or Fee				
Unit Letter	1085 F	ed From The	FNL Line		010 Fee	t From The _	FWL	Line	
Section 11 Township	, 29N <sub>R</sub>	ange 9W	, NM	1PM,	SAN	JUAN		County	
III. DESIGNATION OF TRAN			kisk samenad	eans of this fo	am is to be see				
Name of Authorized Transporter of Oil or Condensate			Address (Give address to which approved copy of this form is to be sent)  3535 EAST 30TH STREET, FARMINGTON, CO 87401						
Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent)								
EL PASO NATURAL GAS CO If well produces oil or liquids, give location of tanks.	DMPANY						1978		
If this production is commingled with that IV. COMPLETION DATA	from any other lease or po-	ol, give comming!	ng order numb	er:					
Designate Type of Completion	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Pr	od.	Total Depth			P.B.T.D.		<b>L</b>	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			
	TUBING, C	ASING AND	CEMENTIN	IG RECOR	RD				
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQUEST FOR ALLOWABLE									
Date First New Oil Run To Tank	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  Date of Test  Producing Method (Flow, pump, gas lift, etc.)								
Length of Test	Tubing Pressure		Casing Pressu		CELVE				
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.			G22M990			
GAS WELL				OIL C	ON. I	ON. DIV.			
Actual Prod. Test - MCF/D	Length of Test				STity Condensate				
l'esting Method (pitot, back pr.)	Tubing Pressure (Shut-in	Casing Pressure (Shut-in)			Choke Size				
VI. OPERATOR CERTIFICATE OF COMPLIANCE  Thereby certify that the rules and regulations of the Oil Conservation			OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Date Approved JUI 2 1990					
D. H. Shly									
Signature Doug W. Whaley, Staff Admin. Supervisor Printed Name Title				By SUPERVISOR DISTRICT 13					
June 25, 1990 303-830-4280 Date Telephone No.									

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.