State of New M
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New M
Energy, Minerals and Natural R
OIL CONSERVATION

Department

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

OIL CONSERVATION DIVISION

DISTRICE II P.O. Drawer DD, Anesia, NM 88210	P.O	Box 2088 Mexico 87504-2088				
DISTRICT III 1000 Rio Brazas Rd., Azzec, NM 87410	·	VABLE AND AUTHORIZATI	ON			
I. Operator		OIL AND NATURAL GAS	Well API No.			
Amoco Production Comp	any		WEIL APT NO. 1004523363			
Address 1670 Broadway, P. O.	Box 800, Denver, Color		004323303			
Reason(s) for Filing (Check proper box)		Other (Please explain)				
New Well Recompletion	Change in Transporter of: Oil Dry Gas	٦				
Change in Operator	Casinghead Gas Condensate	ว้				
If change of operator give name and address of previous operator Ten	neco Oil E & P, 6162 S	. Willow, Englewood, C	olorado 80155			
II. DESCRIPTION OF WELL	AND LEASE					
Lease Name FLORANCE		cluding Formation	Lease No.			
Location	109 BLANCO (P	ICTURED CLIFFS) F	EDERAL SF079511A			
Unit Letter	: 1540 Feet From The	FSL Line and 1680	Feet From The FEL Line			
Section 31 Townshi	ip 30N Range 8W	, NMPM, SA	N JUAN County			
III. DESIGNATION OF TRAN						
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which app	roved copy of this form is to be sent)			
Name of Authorized Transporter of Casin EL PASO NATURAL GAS COL		Address (Give address to which app P. O. BOX 1492, EL P.	roved copy of this form is to be sent)			
If well produces oil or liquids, hive location of tanks.			When?			
If this production is commingled with that IV. COMPLETION DATA	from any other lease or pool, give comm	ingling order number:				
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deep	Die Det Company			
Designate Type of Completion	- (X)	New Weli Workover Deep	pen Plug Back Same Res'v Diff Res'v			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
Perforations			Depth Casing Shoe			
HOLE SIZE	CASING & TUBING SIZE	ID CEMENTING RECORD	SACKS OF MENT			
	CASINO & TODING SIZE	DEPTH SET	SACKS CEMENT			
V. TEST DATA AND REQUES	T FOR ALLOWABLE					
OIL WELL (Test must be after re Date First New Oil Run To Tank	ecovery of total volume of load oil and m	Producing Method (Flow, pump, gas				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
Actual Prod. During Test	Oil - Bbls.	Water - Bbis.	Gas- MCF			
() A C TPTL I						
GAS WELL Actual Prod. Test - MCI/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate			
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
VI ODED ATOD CEDATER	ATE OF COLUMN					
VI. OPERATOR CERTIFICA I hereby certify that the rules and regula Division have been complied with and the	tions of the Oil Conservation	OIL CONSEF	RVATION DIVISION			
is true and complete to the best of my ki	nowledge and belief.	Date Approved	MAY 08 1989			
(1 1 2/2)	at.	Date Apployed	A .			
Significant Significant	von	Ву	1) Chang			
J. L. Hampton Sr Printed Name	. Staff Admin. Suprv.	SUPER	VISION DISTRICT # 3			
Janaury 16, 1989	303-830-5025 Telephone No.	Title				

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 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.

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Mobbs, NM 88240 DISTRICT II P.O. Drawer DD, Antesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

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

					SEE AND A)IV					
•		TO TRA	NSP	ORT OIL	AND NA	TURAL G	AS	V=0	br sta				
Operator AMOCO PROPRIETTON COMPA	ator						Well API No. 3004523363						
AMOCO PRODUCTION COMPA	LNY								0432330				
Address P.O. BOX 800, DENVER,	COLORAI	00 8020	1										
Reason(s) for Filing (Check proper box)					Oth	x (l'iease expi	ain)						
New Well		Change in	•					_					
Recompletion	Oil		Dry G		/ .			7					
Change in Operator	Casinghea	d Gas	Conde	neate 📗					····				
f change of operator give name ad address of previous operator													
I. DESCRIPTION OF WELL	ANDIE	A CE											
	ALIE DE	Well No.	Pool N	lame, Includi	ng Formation		1	Kind o	Lease	L	ease No.		
FLORANCE		109	BL	ANCO (I	ICT CLI	FFS)		FE.	DERAL	SF)79511A		
Location J		1540	Feet Fr	rom The	FSL	e and	1680	Fee	at From The	FEI	Line		
Section 31 Townshi	3(ON	Range	8W	, N	мрм,		SA	N JUAN		County		
II. DESIGNATION OF TRAN	SPORTE	OF OF O		U NATU	Address (Gir	e oddress to w	hich app	oved	copy of this f	orm is to be se	eni)		
Name of Authorized Transporter of Oil MERIDIAN OIL, INC.		Or COMBE	15mc		Address (Give outdress to which approved copy of this form is to be sent) 3535 EAST 30TH STREET, FARMINGTON, NM 8740								
Name of Authorized Transporter of Casin EL PASO NATURAL GAS C	ghead Gas		or Dry	Gas 🔲	Address (Giv	e address to w	hich app	roved	copy of this f	orm is to be s			
EL PASO NATURAL GAS C	OMPANY					30X 1492				79978			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp	Rge.	ls gas actuali	y consected?		When	7 				
f this production is commingled with that	from any ot	her lease or	pool, gi	ve comming	ling order num	ber:							
V. COMPLETION DATA		_,	<u>,_</u>						Div. Deale	Ic Bash	Diff Res'v		
Designate Type of Completion	- (X)	Oil Wel	'	Gas Well	New Well	Workover	Dec	pen	Hing mack	Same Res'v	Jan Kest		
Date Spudded	Date Compl. Ready to Prod. Name of Producing Formation				Total Depth				P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)					Top Oil/Gas	Top Oil/Gas Pay				Tubing Depth			
l'erforations					_l				Depth Cass	ig Shoe			
		TI IDINIC	CAS	INC AND	CEMENT	NC PECOI	2.0		<u> </u>				
	TUBING, CASING AND				CEMENT	DEPTH SET				SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE				0002								
					<u> </u>								
									ļ				
	T				<u> </u>				J				
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABLE			ton ol	lloumble	for thi	e dansk or be	for full 24 ho	urs.)		
OIL WELL (Test must be after			of load	oil and mus	Producing M	lethod (Flow, p	pump, ga	s lift, d	uc.)	<i>Ju.</i> J			
Date First New Oil Rua To Tank	Date of T	CM											
Length of Test	Tubing P	Letanie			Cause Free	ure , t	W	E	Shoke Size	1			
					Water Bbl			- 1	das-MCF				
Actual Prod. During Test	Oil - Bbi	£.		•		FEB25	1991	152					
GAS WELL Actual Prod. Test - MCF/D	Length o	Test			Bola. Conde	Beate/MIMCF	. U	٧.	Gravity of	Condensate			
VICTOR LLOS LOS - MICHAEL	- Lugar C					DIST.	3		Choke Size	a de entanticipa e la constitución			
l'esting Method (pitot, back pr.)	Tubing I	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				•			
VI. OPERATOR CERTIFIC	CATE	E COM	DITA	NCF	-\						<u> </u>		
I hereby certify that the rules and reg	CATE O	Pe Oil Cour	revation	INCL	li .	OIL CO	NSE	RV	ATION	DIVISI	ON		
Division have been complied with an	d that the in	formation g	ven abo	YE					FEB 25	1991			
is true and complete to the best of my	y knowledge	and belief.			Dat	e Approv	ed _						
11,11.10						- · - F F · - 3 ·		,		1. /	,		
_ D.P. Whiley					By.		-2	سندد	د ر ح	yerory.			
Signature Doug W. Whaley, Staff	f Admi	n. Supe	rvis Tide		Title	a	SI	JPE	RVISOR	DISTRICT	/ /3 		
February 8, 1991		303		4280		·							
Date					- 11								

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.