

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator AMOCO PRODUCTION COMPANY		Well API No. 300451091500
Address P.O. BOX 800, DENVER, COLORADO 80201		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name HUTCHIN LS	Well No. 1	Pool Name, Including Formation BLANCO MESAVERDE (PRORATED GAS)	Kind of Lease (State, Federal or Fee)	Lease No.
Location Unit Letter G : 1700 Feet From The FNL Line and 1650 Feet From The FEL Line Section 7 Township 31N Range 10W 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 type="checkbox"/> MERIDIAN OIL INC.	Address (Give address to which approved copy of this form is to be sent) 3535 EAST 30TH STREET, FARMINGTON, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1492, EL PASO, TX 79978	
If well produces oil or liquids, give location of tanks.	Unit	Soc.
	Twp.	Rge.
Is gas actually connected?		When?

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	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				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		CEMENT			

V. 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 allowable 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 - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature
Doug W. Whaley, Staff Admin. Supervisor
Printed Name
Date July 5, 1990
Telephone No. 303-830-4280

OIL CONSERVATION DIVISION

Date Approved AUG 23 1990
By [Signature]
Title SUPERVISOR DISTRICT #3

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.

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

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

WELL API NO. 300451091500
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. Lease Name or Unit Agreement Name Hutchins LS
2. Name of Operator Amoco Production Company Gail M. Jefferson	8. Well No. No. 1
3. Address of Operator P. O. Box 800, Denver, Colorado 80201 (303) 830-6157	9. Pool name or Wildcat Blanco Mesaverde
4. Well Location Unit Letter G : 1700 Feet From The North Line and 1650 Feet From The East Line Section 7 Township 31N Range 10W NMPM San Juan County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: Bradenhead Repair <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Amoco Production Company requests permission to perform a Bradenhead repair on the above referenced well. Please see attached procedures.

If you have any technical questions please contact Khahn Vu at (303) 830-4920 or myself for any administrative questions at the telephone number listed above.

RECEIVED
MAR 13 1995
OIL CON. DIV.
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Gail M. Jefferson TITLE Business Assistant DATE 03-09-1995
TYPE OR PRINT NAME Gail M. Jefferson TELEPHONE NO. (303) 830-6157

(This space for State Use)

APPROVED BY Johnny Robinson TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE MAR 13 1995
CONDITIONS OF APPROVAL, IF ANY:

Hutchin LS 1

Orig. Comp. 10/54

TD = 5128' , PBD = 5105'

Page 2 of 2

1. Record TP, SICP, and SIBHP.
2. MIRUSU
3. TOH with 2 3/8" tubing landed at 5088' (check condition of tubing).
4. RIH with RBP and set at 4000', cap with sand.
5. Determine freepoint of 4 1/2". Backoff 4 1/2" casing below 2500' (TOC @ 2200').
6. Run CBL from top of 4 1/2" to surface and fax to Khanh Vu (Denver, 303-830-4276)
7. Perforate 2 squeeze holes within 100' of TOC (2200') of primary cement
8. Conduct a cement squeeze with adequate cement. Objective is to cover the Ojo Alamo (1780-1983').
9. Drill out cement.
10. Perforate 2 squeeze holes within 100' of TOC (867') of secondary cement.
11. Attempt to circulate cement and/or conduct a cement squeeze with adequate cement.
12. Drill out cement
13. TOH with RBP
14. Screw back 4 1/2" casing.
15. Clean out to PBD (5105').
16. RIH with 2 3/8" tubing.
17. Tie well back into surface equipment and turn over to production.

If problems are encountered, please contact:

Khanh Vu

W - (303) 830-4920

H - (303) 980-6324

Amoco Production Company

ENGINEERING CHART

SUBJECT HUTCHIN LS 1 MV

Sheet No _____ Of _____
File _____
Appn _____
Date _____
By _____

