NO. OF COPIES RECE	15			
DISTRIBUTIO				
SANTA FE	1			
FILE		_		
U.S.G.S.		L		
LAND OFFICE	LAND OFFICE			
IRANSPORTER	OIL		<u> </u>	
TRANSI GRIER	GAS			
OPERATOR				
PRORATION OF				

ļ- -	DISTRIBUTION SANTA FE FILE	ur	NEW MEXICO OIL C	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65						
	U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS								
1.	Operator									
	AMOCO PRODUCTION COMPANY Address									
	501 Airport Drive, Farmington, New Mexico Reason(s) for filing (Check proper box) Other (Please explain)									
	New West Recomplished Change in Gwnership	Change in Oil Casinghea	Transporter of: Dry Go ad Gas Conde	=						
	If change of ownership give name and address of previous owner									
	DESCRIPTION OF WELL AND LE	ASE				1		Lease No.		
,	Legse Name Boyd Gas Com	Well No.	Well No. Pool Name, Including Fo		i _		Ind of Lease tate, Federal or Fee			
	Location Unit Letter C ; 1170	Feet From	m The North Lin	ne and	1640	Feet From Th	ne West			
	Line of Section 8 Towns	hip 31N	Range	10W	, NMPN	, San	Juan	County		
Ш.	DESIGNATION OF TRANSPORTE	R OF OIL	AND NATURAL GA	Address	(Give address	to which approve	ed copy of this form is	to be sent)		
	Plateau. Inc.			P. O.	Box 108	. Farmingt	on. New Mexic	0 87401		
	Name of Authorized Transporter of Casing R1 Paso Natural Gas Com		or Dry Gas 🌋		,		gton, New Mexico 87401			
		nit Sec.		Is gas a	No	ed? Wher				
IV.	If this production is commingled with COMPLETION DATA						Plug Back Same Re	sty Diff Besty		
	Designate Type of Completion	– (X)	oil Well Gas Well	X	Workover	Deepen	† 			
	Date Spudded 11-17-76	-	Ready to Prod. 1-76	Total De	5175*		P.B.T.D. 5134	,		
	Elevations (DF, RKB, RT, GR, etc.)	ame of Produ	acing Formation		/Gas Pay 4097 ¹		Tubing Depth 5055			
	Perforations 4097-4103, 4188-	191, 41	94-96, 4250-53	4319	-53, 4361	-66, 4384-	Spoth Casing Shoe			
	4402-11, 4422-64, 4487- 4716, 4719-26, 4765-73,	6812-17 J	TUBING, CASING, AN	D CEMEN	ITING RECO	RU ARZRAN	i, 4918-35, 49	47-53,		
	5020-28, HOLE SIZE 5040-47 1	CASING	& TUBING SIZE	SPT.	DEPTHS	E 1	SACKS CE	MENT		
	12-1/4"	<u>9-5/8</u>	" csg.		258 ¹ 2950 ¹		280 620			
			" liner		2759-517		310			
	6-1/4"	2-3/8	" tbg.		5055	! 				
V.	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 a									
	OIL WELL Date First New Oil Run To Tanks	Date of Test			Producing Method (Flow, pump, gas lift,		, etc.)			
	Length of Test	Tubing Pressure		Casing	Casing Pressure		Choke Size			
	Actual Prod. During Test	Oil-Bhis.			Water-Bbls.		Gro-MOTIST.			
	1						Market Market Control of the Control			
	GAS WELL Actual Prod. Test-MCF/D	ength of Tes	nt .	Bbls, C	ondensate/MM	CF	Gravity of Condensat	:•		
	399	3 hr.		0-1-	Pressure (Shu	+-1n \	Choke Size			
	Testing Method (pitot, back pr.) Back pressure	Cubing Press 624	we (shut-in)	Casing	677		.75			
VI.	CERTIFICATE OF COMPLIANCE				OIL	CONSERVA	TION COMMISSION	NC		
	I hereby certify that the rules and re-	rulations of	the Oil Conservation	1 11	ROVED	A Land	<i>i </i>	, 19		
	Commission have been complied wit above is true and complete to the l	h and that	the information give:	. BY_	Original SUPI	Signed by	A. R. Kendrick	·		
					THE This form is to be filed in compliance with RULE 1104.					
	(Signature)			l I			able for a newly dri	lied or deepened		
	(Signature)			well,	well, this form must be accompanied by a tabulation of the deviation of th					
Area Adm. Supvr. (Title) January 10, 1977			-	All sections of this form must be filled out completely for allowable on new and recompleted wells.						
			- 11 .	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.						
(Date)									- []	