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Form C-105  
Revised 11-1-74

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL		5a. Indicate Type of Lease	
OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>		State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>	
b. TYPE OF COMPLETION		5. State Oil & Gas Lease No.	
NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>			
2. Name of Operator		7. Unit Agreement Name	
AMOCO PRODUCTION COMPANY		Uptegrove Gas Com	
3. Address of Operator		8. Farm or Lease Name	
501 AIRPORT DRIVE, FARMINGTON, NEW MEXICO 87401		1A	
4. Location of Well		10. Field and Pool, or Wildcat	
		Blanco Mesaverde	
UNIT LETTER <u>I</u> LOCATED <u>1470</u> FEET FROM THE <u>South</u> LINE AND <u>1190</u> FEET FROM		12. County	
THE <u>East</u> LINE OF SEC. <u>33</u> TWP. <u>32-N</u> RGE. <u>10-W</u> NMPM		San Juan	
15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)
5/14/77	5/24/77	6/7/77	5864 CL
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By
5250	5216		Rotary Tools
24. Producing Interval(s), of this completion - Top, Bottom, Name			25. Was Directional Survey Made
4520-5165 Mesaverde			NO
26. Type Electric and Other Logs Run			27. Was Well Cored
Induction Electric, Gamma Induction Log, and Compensated Density Log			NO
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE
9-5/8"	36.3	268'	12-1/4"
7"	23	3075'	8-3/4"
CEMENTING RECORD		AMOUNT PULLED	
268 sx		-	
635 sx		-	
29. LINER RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT
4-1/2"	2868	5250	280
30. TUBING RECORD		PACKER SET	
SIZE	DEPTH SET		
2-3/8"	5174	-	
31. Perforation Record (Interval, size and number)			
4532, 4536, 4544, 4548, 4552, 4559, 4566, 4570, 4574, 4578, 4582, 4586, 4590, 4594, 4597, 4646, 4650, 4755, 4811, 4822, 4877, 4910, 4914, 4940, 4944, 4948, 4954, 4958, 4962, 4966, 4974, 4978, 4982, 4996, 5000, 5004, 5008, 5012, 5016, 5020, 5024, 5032, 5154, 5158, 5165, X 1 SPF			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED	
4520-4650		145,000# sn X 72,500 gal frac fld.	
4755-5165		140,000# sn X 70,000 gal frac fld.	
33. PRODUCTION			
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)	
		Flowing	
Date of Test		Hours Tested	
6/7/77		3	
Choke Size		Prod'n. For Test Period	
.75			
Flow Tubing Press.		Casing Pressure	
305		605	
Calculated 24-Hour Rate		Oil - Bbl.	
		3883	
Gas - MCF		Water - Bbl.	
485			
Oil Gravity - API (Corr.)			
34. Disposition of Gas (Sold, used for fuel, vented, etc.)			
To be sold.			
35. List of Attachments			
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.			
SIGNED		TITLE	
L. O. J. J. J.		Area Supt.	
DATE		June 15, 1977	

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See rule 1105.

**INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE**

### Southeastern New Mexico

### Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzite _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....

No. 2, from.....to.....

No. 3, from.....to.....

No. 4, from.....to.....

No. 5, from.....to.....

No. 6, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet. ....

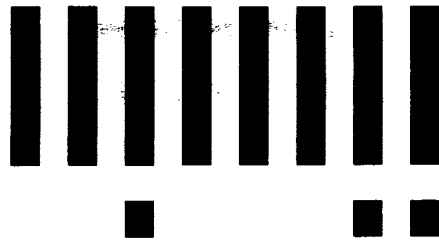
No. 2, from.....to.....feet. ....

No. 3, from.....to.....feet. ....

No. 4, from.....to.....feet. ....

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
4518	4598	80	Cliffhouse				
4598	4930	332	Manefee				
4930	5051	121	Point Lookout				
5051			Mancos				



**LTR**



**Job separation sheet**

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-111  
Effective 1-1-65

I. Operator

**AMOCO PRODUCTION COMPANY**

Address

**501 AIRPORT DRIVE, FARMINGTON, NEW MEXICO 87401**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of:

Recompletion ☐ Oil ☐ Dry Gas ☐

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
<b>Uptagrova Gas Com</b>	<b>1A</b>	<b>Blanco Mesaverde</b>	State, Federal or Fee <b>Fee</b>	
Location				
Unit Letter <b>I</b>	<b>1470</b>	Feet From The <b>South</b> Line and <b>1190</b>	Feet From The <b>East</b>	
Line of Section <b>33</b>	Township <b>32-N</b>	Range <b>10-W</b>	NMPM, <b>San Juan</b>	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)
<b>Platau, Inc.</b>	<b>P. O. Box 108, Farmington, NM 87401</b>
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)
<b>El Paso Natural Gas Company</b>	<b>P. O. Box 990, Farmington, NM 87401</b>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<b>I 33 32N 10W</b>	<b>NO Approximately 60 days</b>

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.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
<b>5/14/77</b>	<b>6/7/77</b>	<b>5250</b>	<b>5216</b>					
Elevations (D.F., RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
<b>5864 GL</b>	<b>Mesaverde</b>	<b>4520</b>	<b>5174</b>					
Perforations	Depth Casing Shoe							
<b>4520, 4524, 4528, 4532, 4536, 4544, 4548, 4552, 4559, 4566, 4570, 4574, 4578, 4582, 4586, 4590, 4594, 4597, 4646, 4650, 4755, 4811, OVER</b>	<b>5250</b>							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<b>12-1/4"</b>	<b>9-5/8"</b>	<b>268'</b>	<b>268 ex</b>					
<b>8-3/4"</b>	<b>7"</b>	<b>3075'</b>	<b>635 ex</b>					
<b>6-1/4"</b>	<b>4-1/2"</b>	<b>2868-5250'</b>	<b>280 ex</b>					

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 for this depth or be for full 24 hours)

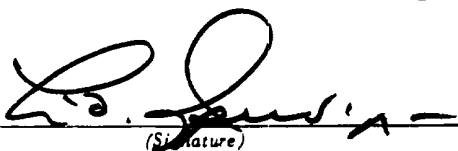
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
<b>3833</b>	<b>3 hours</b>		
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
<b>Back pr.</b>	<b>636</b>	<b>669</b>	<b>.75</b>

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



Area Supt.  
(Title)

6/15/77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY Original Signed by A. R. Mondrick

TITLE \_\_\_\_\_

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.

**Perforations Continued:**

**4822, 4877, 4910, 4914, 4940, 4944, 4948, 4954, 4958, 4962, 4966, 4974, 4978,  
4982, 4996, 5000, 5004, 5008, 5012, 5016, 5020, 5024, 5032, 5154, 5158, 5165,  
X 1 SPF.**