

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/>
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-110
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 <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Keys Gas Com "A"	Well No. 1A	Pool Name, including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter C	800	Feet From The North	Line and 1850	Feet From The West
Line of Section 27	Township 32-N	Range 10-W	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 checked="" type="checkbox"/>	Address Give address to which approved copy of this form is to be sent					
Platesu, Inc.	P. O. Box 108, Farmington, NM 87401					
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					
El Paso Natural Gas Company	P. O. Box 990, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 27	Twp. 32-N	Rge. 10-W	Is gas naturally connected? No	When Approximately 60 days

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 4/28/77	Date Compl. Ready to Prod. 5/27/77		Total Depth 5375'		P.B.T.D. 5338'			
Elevations (DF, RKB, RT, GR, etc.) 5975' GL	Name of Producing Formation Mesaverde		Top Oil Gas Key 5282'		Tubing Depth 5375'			
Perforations 4457-59, 4656-59, 4662-65, 4669-71, 4676-79, 4687-4712, 4717-4731-58, 4736-62, 4768-80, 4806-08, 4817-24, 4843-45, 4851-66, 4872-76 OVER					Depth Casing Shoe 5375'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8"		267'		280 sx			
8-3/4"	7"		3200'		650 sx			
6-1/4"	4-1/2"		3013-5375'		280 sx			

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
2572	3 hours		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
back pr.	861	914	.75

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.

J. L. Lusk
(Signature)
Area Adm. Supvr.
(Title)
June 3, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Original Signed by J. S. Hendrick
TITLE SUPERVISOR

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:

4958-91, 4994-97, 5000-04, 5012-20, 5047-54, 5060-64, 5090-93, 5097-5100,
5106-13, 5116-20, 5140-44, 5176-78, 5184-89, and 5290-96 with 1 SPF.