	4 : 2	REQUEST F	OR ALLOWABLE	20jetseder (44 U-164 050 U-116 Effective 1-1-65
		AUTUODIZATION TO TRAN	AND ISPORT OIL AND NATURAL (/ :AS
i	LAND OFFICE	AUTHORIZATION TO TRAIL	TO OR FOR AND TRATORINE C	
;-	IRANSPORTER OIL			
	GAS			
. [OPERATOR I			
ı. <u> </u>	PRORATION OFFICE			,
	AMOCO PRODUCTION COMPANY			
501 Airport Drive Farmington, NM 87401				
-	Reason(s) for filing (Check proper box)	mington, Mr 6/401	Other (Please explain)	
1	New Well	Change in Transporter of:		
1	Recompletion	OII Dry Gas Casinghead Gas Condens	71	
L	Change in Ownership	0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Ì	f change of ownership give name ind address of previous owner			
		DACE		
	DESCRIPTION OF WELL AND L	Well No. Pool Name, Including Fo	rmation Kind of Leas	Lease No.
	State Gas Com ''M''	1A Blanco Mesaver	rde State, Federa	E-8443
ĺ	Location.	·	1045	
	Unit Letter I ; 1460	Feet From The South Line	and 1045 Feet From	The <u>East</u>
	Line of Section 16 Town	ship 31N Range	12W , NMPM, San J	uan County
1		CD OF OIL AND NATURAL CA	c c	
II .	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	or Condensate X	Address (Give address to which appro	oved copy of this form is to be sent)
 	Plateau. Inc.		P.O. Box 108 Farming	ston, NM 87401
	Name of Authorized Transporter of Casi		l	ton, NM 87401
į	El Paso Natural Gas Co	Unit Sec. Twp. Fige.		her.
	If well produces oil or liquids, give location of tanks.	I 16 31N 12W	No	
į	If this production is commingled with	n that from any other lease or pool,	give commingling order number:	
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
1	Designate Type of Completion		X	
	Date Spudded	Date Compl. Ready to Prod. 2/14/78	Total Depth 5101	P.B.T.D. 5057'
	12/12/77 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	6099' GL, 6112' KB	Mesaverde	4223'	4981'
	erforations 4223-28, 4232-40, 4267-93, 4299-4304, 4		536-40, 4866-82,	Depth Casing Shoe 5094
	4896-4926, 4944-50, 4958-62, 4974-84 TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	13-3/4"	9-5/8" Casing	278'	306 570
	8-3/4" 6-1/4"	7" Casing 4-1/2" Casing	2811' 2589-5094'	345
		2-3/8" Tubing	4981	
v.	EST DATA AND REQUEST FOR ALLOWABLE (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)			
			Producing Method (Flow, pump, gas	
	Date 1 Met 1			Choke Size
	Length of Test	Tubing Pressure	Cosing Pressure	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gha-MCF
	2000			
	•			OIL COLL TO
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Canadisate
	1344	3 hours Tubing Pressure(Shut-in)	Chaing Pressure (Shut-in)	Choke Size
	Testing Method (pilot, back pr.)	450 psig	803 psig	0.75"
	Back Pressure 450 psig CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
VI.			APPROVED	28 19/8
	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.		APPROVED	
			TITLE SUPERVISOR DIST.	
	Original Signed By		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepens	
	E. E. SVOBODA (Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
	Area Adm. Supervisor		All sections of this form must be filled out completely for allow	
	(Title)		able on new and recompleted wells.	

2/24/78 (Date)

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