Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION P.O. Box 2088

State of New Mexico

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT III 1000 Rio Brazos Rd., Azlec, NM 87410	BEO			-		ELE VV			アムエル	ON!					
REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS															
Operator AMOCO PRODUCTION COMPANY							Weil API No. 3004524279								
P.O. BOX 800, DENVER,	COLORA	DO 8020	01												
Reason(s) for Filing (Check proper bax) New Well		Change in	Tran	sporter	of:		Other (Pl	ease expl	ain)						
Recompletion  Change in Operator	Oil Casinghea	nd Gar [	Dry	Gas densale		, , ,									
If change of operator give name and address of previous operator															
II. DESCRIPTION OF WELL	AND LE	ASE													
FIELDS COM		Well No.	BASIN (DAF			-					of Lease DERAL		NDM36309		
Location N Unit Letter		1090	Ener	From 1	n.	FSL	Lipe and	1	475		F 73	FWL			
Section 28 Township	32	N	Rang		11W	<del></del>	, NMPM,				et From The . N. JUAN		County		
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS															
Name of Authorized Transporter of Oil Or Condensate MERIDIAN OIL, INC.							Address (Give address to which approved copy of this form is to be sent)  3535 EAST 30TH STREET, FARMINGTON, NM 87401								
ine of Authorized Transporter of Casinghead Gas L. PASO NATURAL GAS COMPANY Or Dry Ga				ry Gas		Address (Give address to which ap					FARMIN	GTON NI	1 87401 m)		
If well produces oil or liquids,	<del> </del>			Rve	P.O. BOX 1492, EL 1				PASO, TX 79978 When 7						
give location of tanks.	ii		<u> </u>	_Ĺ		<u> </u>					•				
f this production is commingled with that f V. COMPLETION DATA	rom any oth	er lease or	pool,	give co	mmingl	ing order r	umber:					<del></del>	<del> </del>		
Designate Type of Completion	- (X)	Oil Well		Gas \	Well	New W	eu   Wo	kover	Dec	ca	Plug Back	Same Res'v	Diff Rea'v		
Date Spudded	Date Com	pl. Ready to	Prod			Total Dep	alb		L		P.B.T.D.	I			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay					Tubing Depth				
Perforations										Depth Casing Slice					
TIDING CASING AND						CEMEN	TINC P	ECOR	<u> </u>						
HOLE SIZE	TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE					DEPTH SET					SACKS CEMENT				
V. TEST DATA AND REQUEST FOR ALLOWABLE															
OIL WELL (Test must be after recovery of total volume of load oil and must Date First New Oil Run To Tank   Date of Test							be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)								
Length of Test						Cating Pr	( suint	ু ভোৱা	วย ธา	<u>.</u>	Choke Size				
						THEREIAE!!									
Actual Prod. During Test	Oil - Bbls.					FEB 2 5 1991									
GAS WELL Actual Prod. Test - MCF/D						1611 <del>63</del>	<del>!  .C</del> /		<i>D</i> 17	11	T21 - 7.6				
Actual Front Feet - MCF/D	Length of Test					Bbis. Collegistic/MMC8. Lift. J Gravity of Condensate DIST. 3									
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)					Casing Pr	essure (Sh	ul-in)			Choke Size				
VI. OPERATOR CERTIFICATE OF COMPLIANCE						OIL CONSERVATION DIVISION									
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.						Date Approved FEB 2 5 1991									
L. D. Whley						By Buy									
Signature Doug W. Whaley, Staff Admin. Supervisor						SUPERVISOR DISTRICT #3									
Printed Name   Title   February 8, 1991   303-830-4280							le		- ' '						
Date	<u> </u>														

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.