District I PO Box 1980, Hobbs, NM 88241-1980 District II

811 South First, Artesia, NM 88210

District III

Previous Operator Signature

OIL CONSERVATION DIVISION

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994

110 11000 0010001 10, 1774
Instructions on back
Appropriate District Office
5 Copies

C1 4%

1000 Rio Braz	os Rd., Azte	ec, NM 87410				in Pach NM 87						5	Copie	
District IV 2040 South Page	checo, Santi	4 Fc. NM 875	05		,		505] AM	ENDED RI	EPOR	
I.				LLOWAB	LE A	ND A	J THO	RIZAT	TON TO T	RANS	POR'	т		
I. REQUEST FOR ALLOWABLE AND AUTHOR Operator name and Address									OGRID Number					
Amoco Production Company							000778							
P. O. Box 800 Denver, Colorado 80201									3 Reason for Filing Code					
		•	0020						RC-Re	ecomp.	letic	on		
i	API Numbe	r				⁵ Pool Nan	e			T		Pool Code		
L	0 - 0 4524279			Lanco Mesa	verde	3		72319						
00051	roperty Coo	le	Fie	Property Name Fields Com						* Well Number				
		 _l									#4			
II. 10	Section	Location		T			,							
N	28	32N	Runge 11W	Lot.ldn	Feet from the North/South Line				1	ust/West line		y		
	L		1		1090	, 	501	uth ———	1475	West	t 	San Juar	1	
UL or lot no.	Section	Hole Lo		т			, -							
C17 61 101 EQ.	Section	IOWESTIP	Range	Lot Idn	Feet fro	un the	North/	North/South line Feet fro		East/W	est line	Count	y	
12 Lise Code	13 Produc	ing Method C	and all 14 Com	Connection Date	1					<u> </u>				
F	Flowi		OES .	Connection Date	"	C-129 Perm	it Numbe	「	" C-129 Effective I	Date	" C-	129 Expiration	Date	
II. Oil a			rtero		<u> </u>									
"Transpor			* Transporter	Numa		24.150		1 1 2 2	green a c		· .			
OGRID			and Addres			" PO	D	3, O/C	'	POD UI	LSTR Lo Descriptio			
151618	E1	Paso F	ield Ser	vices	2	8 2 2 2	77	G	2780		- I par			
	9000000X04	O. Box			- R	0 2 2 2			[D]					
	Fa	rmingto	n, New M	lexico 874			A (*					The same of the sa	<u> </u>	
9018			ining Co	•	28	222	20	0	ИÜ	OCT	- 8	1833 - ⁷⁷		
		0. Box		na 85267					(SII	n za				
			<u>-, 111-110</u>	03207					<u>W</u> U	H C		S COLUMN		
										Di	Diet, a			
					- 1							· · · · · · · · · · · · · · · · · · ·		
V. Produ	ced Wa	ater												
	OD					POD UL	STR Loca	tion and D	escription			·		
2822	2228								- contributed					
. Well C				**							 -			
35 Spud	Date	20	Ready Date	27	'TD		21 PB	TD	2º Perforati	in DS	s ³⁶ DHC, DC,M			
11/24/	80	9/2	25/98	787	77 '	7	600'		5313'-566	21	Dire, De, Me		•	
•	¹ Hole Size		32 C	using & Tubing S	iize	1 .550		Depth Set	4939'-523	5'	M Sack	s Cement		
12-1/4"			9-5/8	11			267'			0 0250			A CIT	
8-3/4"			7"		3643'							B w/2% C		
6-1/4"			4-1/2	4-1/2"					600 sxs BJ-Lite;					
					7873' (Line						υ - 3.			
Tubin		· · · · · · · · · · · · · · · · · · ·	2.375"				5510 '		HR	-4, 1	50 s:	xs C1 B		
I. Well Date Ne			P. D.	1 17										
#1#IC 146	011	Gas Do	clivery Date	" Test II 9/24/98	Palc	1	Test Les	ngth	" Tog. Pres	wure		Csg. Pressure		
41 Choke	Size	42	Oil			12			150#		720#			
48/6411		Trace	-	25 bbls	er	2	Gas 4 mcf		4 AOF					
	that the en			vision have been ed	1		4 mcl				F1e	owing		
vitu and that the	miomation	given above is	true and comp	vision have been co lete to the best of i	my .		. UI	L CON	NSERVATIO	ות מר	Vici	ON		
nowledge and be ignature:	incl.	16	\cap	_)				Origino	al Signed by FR	ARK T.	CHAVE	7		
	Xau	<u>l TU.</u>	xyge	sm		Approved	by:							
rinted name:	Gail N	M. Jeffe	erson			Title:		SU	PERVISOR D	STRIC	T#3		\dashv	
Sr. Admin. Staff Asst.						Approval Date: 10 - 16 - 98								
Date: 10/6/				03) 830-61	57				0-16-	18			_	
		rutar fill in the		ber and name of t		ONE ACCUS							4	

Printed Name

Title

New Mexico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

- 1. Operator's name and address
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
- Reason for filing code from the following table:

 NW New Well

 RC Recompletion

 CH Change of Operator (Include the effective date.)

 AO Add oil/condensate transporter

 CO Change oil/condensate transporter

 Add das transporter 3.

RC CH AO CO AG CG RT Add gas transporter
Change gas transporter
Request for test allowable (include volume requested)

If for any other reason write that reason in this box.

- 4. The API number of this well
- 5. The name of the pool for this completion
 - The pool code for this pool

6.

- The property code for this completion
- 8. The property name (well name) for this completion
- 9. The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- 11. The bottom hole location of this completion
- Lease code from the following table:
 F Federal
 S State
 P Fee ... 12.

 - Jicarilla
 - Navajo Ute Mountain Ute
 - Other Indian Tribe
- The producing method code from the following table:
 F Flowing
 P Pumping or other artificial lift 13.

- MO/DA/YR that this completion was first connected to a 14. gas transporter
- The permit number from the District approved C-129 for this completion 15.
- 16. MO/DA/YR of the C-129 approval for this completion
- 17. MO/DA/YR of the expiration of C-129 approval for this
- 18. The gas or oil transporter's OGRID number
- Name and address of the transporter of the product 19.
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- Product code from the following table:
 O Oil 21.

Gas

- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.) 22.
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 23.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce
- Total vertical depth of the well 27.
- Plugback vertical depth 28.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore.

- Inside diameter of the well bore 31.
- Outside diameter of the casing and tubing 32.
- Depth of casing and tubing. If a casing liner show top and 33. bottom.
- 34 Number of sacks of cement used per casing string

If the following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produced 35.
- MO/DA/YR that gas was first produced into a pipeline 36.
- MO/DA/YR that the following test was completed 37.
- Length in hours of the test 38.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- Diameter of the choke used in the test 41.
- 42 Barrels of oil produced during the test
- 43 Barrels of water produced during the test
- MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- The method used to test the well: The method used to test trie wen.

 F Flowing
 P Pumping
 S Swabbing
 If other method please write it in.

- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report 47.
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 48.