I.

## OIL CONSERVATION DIVISI. 4

	OIL CONSERV	ATION DIVISION			
DISTRIBUTION	P. O. DOX 2088				
FILE	SANTA FE, NE	W MEXICO 87501			
U 1.0.1.					
LAND OFFICE	REQUEST FO	OR ALLOWABLE			
TRANSPORTER GAS	ДИА				
OPERATOR	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL (	GAS		
CAPITOLOS					
Amoco Production Comp	any	**************************************			
D O Roy 68 Hobb	os, NM 88240				
P. O. Box 68 Hobb Reason(s) for liling (Check proper box		Other (Please expla	in)		
New Well	Change in Transporter of:				
Recompletion	OII DIY C	σ <b>ε</b>			
Change in Ownership	Casinghead Gas Conde	ensate [ ]			
If change of ownership give name			•		
and address of previous owner	0 0 00000	4 4	61.17.		
DESCRIPTION OF WELL AND	I.E.A.S.F. Ked Hells Y. Well No. Pool Name, Including I	natrow Das	of Leose Today	Lease No	
Fight Mana			of Lease Federal	24490	
Andrikopoulos Federal		'₩	NM-	_1 <u>64490</u>	
100	SO Feet From The South Li	ne and 660 Fee	From The West		
Unit Letter L : 198	SU reet rom the				
Line of Section 24 To	waship 25-S Range	33-Е , ммрм, Le	a	County	
		4.6			
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Cit	TER OF OIL AND NATURAL G.	AS Address (Give address to which	h approved copy of this form is	to be sent)	
Name of Authorized Transporter of On					
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas 💢	Address (Give address to which	ch approved copy of this form is	to be sent)	
El Paso Natural Gas Company		P. O. Box 1492			
If well produces oil or liquida,	Unit Sec. Twp. Rge.	· · · · · · · · · · · · · · · · · · ·			
give location of tanks.	<u> </u>	NO			
	th that from any other lease or pool	, give commingling order numb	per:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover De	epen Plug Back Same Re	stv. Diff. Res	
Designate Type of Completi	on - (X)	X			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
8-22-79	4-14-80	15800'	15754		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	<u> </u>	
3335.3 GR	Morrow	14986'	74874 Depth Casing Shoe		
Perforations					
14986'-15209'	TURING CASING AN	D CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CE	MENT	
20"	16"	1020'	1200 SX Clas	s.C	
14-3/4"	10-3/4"	5000'	3500 SX Lite		
9-1/2"	7-5/8"	12636 '	1400 SX Lite		
6-1/2"	4-1/2"	12419'-15800'			
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume of lepth or be for full 24 hours)	load oil and must be equal to or	exceed top un	
OIL WELL Date First New Oil Bun To Tanks	Date of Test	Producing Method (Flow, pum	p, gas lift, etc.)		
Date First New Oll Aun 10 1 mile					
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
			Gar-MCF		
Actual Prod. During Test	OII-Bbis.	Water - Bbls.	Gu- MC1	•	
GAS WELL				<u></u> -	
Actual Frod. Toot-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensat	L <b>e</b>	
1080	24 hours	0	Choke Sixe		
Teeting Method (piror, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	22/64		
Flowing	9100#	DIL CONC			
CERTIFICATE OF COMPLIAN	CE	UIL CUNS	ERVATION DIVISION		
		APPROVED ALL	22 1980	, 19	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given		Vine Moles			
above is true and complete to the	e best of my knowledge and belief.	BY SHOWLY	San		
		TITLE DUPLIKY	SOLL MANAGEMENT &		
0+4-NMOCD, H 1-	10u 1-Susp	11 /	This form is to be filed in compliance with nuce 1104.		
1-Yates Boly	Blavis	1	as allowed to for a newly dil	Hed or despe-	
(Sian	ature)		ecompanied by a tabulation in accordance with BULK 1		
Admin. Analys		All vactions of this	totan must be tilled out comp	detaily for all	
	ite)	able on new and recompl	oted 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 Separate Forms C-104 must be filled for each pool in multiple completed wells.

(Date)

4-24-80