STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT							•
DISTRIBUTION	OIL CONSERVATION DIVISION P. O. BOX 2088					Form C-104 Revised 10- Format 06-0 Page 1	01·78 ·
LAND OFFICE	SANTA			CO 87501			·
DPERATOR PRORATION OFFICE			D				
I. Operator	AUTHORIZATION T	O TRANSF	ORT OIL	AND NAT	JRAL GAS		
Amoco Production Co							
P. O. Box 832; Brow Resson(s) for filing (Check proper box)	nfield, TX 793	16					
New Well Recompletion Change in Ownership	Change in Transporter Oil Casinghead Gas		Gas ndensate	Other (Pleas Gas (	e explain) Connection Noti	се	
II. DESCRIPTION OF WELL AND Lease Name BDCDGU 1934	Well No. Pool Name,	Including Fo	mation		Kind of Lease Sigle Federal of Fed		Legas No.
Location Unit LetterG; 1650	Feet From The NO		1	 650		<u>Fee</u>	]
Line of Section 26 Towns	19-N	Range	34-E	, NMPM			County
III. DESIGNATION OF TRANSPOI	OF Condensate	ATURAL	GAS Aciaross (C	ive address i	o which approved copy o	of this form is to	
Name of Authorized Transporter of Casing Amoco Production Compan	<u>y</u>		Ρ. (	). Box 8	o which approved copy of 32; Brownfield	TX · 7931	be sentj 6
If well produces oil or liquids, Un give-location of tanks.			s gas actu	ally connecte (es	d? When 10-25		
If this production is commingled with the NOTE: Complete Parts IV and V or			ve commir	ngling order	number:		
VI. CERTIFICATE OF COMPLIANCE				OIL CO	ONSERVATION DI	VISION	
I hereby certify that the rules and regulations o been complied with and that the information giv my knowledge and belief.	f the Oil Conservation Divi en is true and complete to th	he best of	APPROV		9- Know	10	<u>.82</u>

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(Signature) Sr. Administrative Analyst

(Title) August 19, 1987

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(Date)

DISTRICT SUPERVISOR TITLE \_

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells. .

## IV. COMPLETION DATA

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Designate 7	Sype of Completion	on - (X)	Oli Well	Gas Well	New Well	Workover	Deepen I I	Plug Back	Same Res'v.	DHL Rest
Date Spudded	1-10-84	Date Compl. Ready to Prod. 3-14-84			Total Depth 2570'			P.B.T.D. 2500'		
Elevations (DF, R 4733' (	IKB. RT, GR. etc.; GL	Name of Producing Formation Tubb		Top Oll/Gas Pay 2160'			Tubing Depth 2012 '			
Perforations 2160'-23	1 <sup>1</sup> 359'							Depth Casir	2277'	. o. 1
			TUBING,	CASING, AN	D CEMENTI	NG RECOR	0			
нос	ESIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12	1/4	9 5/8"			705 '			390 sx Class H		
8 3	3/4"	7"		2277 '			600 sx Class H			
		ļ	3 1/2	11	20	12'				
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V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to ar exceed top allow-OIL WELL able for this depth or bs for full 24 houre)

Date First New Oil Run To Tarks	Date of Test	Producing Mathod (Flow, pum)	Producing Mathod (Flow, pump, gas lift, etc.)			
Longth of Tost	Tubing Pressure	Casing Pressure	Choke Size			
Actual Prod. During Test	Oil-Bbla.	Walet + Bbie.	Gas-MCF			

## GAS WELL

≂: ..:

Actual Prod. Tool-MCF/D 2531	Length of Tout 23 hrs	Bbls. Condensate/MMCF 10.3	Gravity of Condensate N/A
. Teeting Method (pitot, back pr.)	Tubing Preseure ( Shat-in )	Casing Pressure (Shut-in)	Choze Size
Flowing	337	0	N/A