

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 12-21-73
Format 65-31-23
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. **Owner**
Amoco Production Company
Address
P.O. Box 68, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of:	Other (Please explain)
☐ Recompletion	☐ Oil	☐ Dry Gas
☐ Change in Ownership	☐ casinghead Gas	☐ Condensate

Gas Connection Notice

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease No.	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
BDCDGU	2135	311G TUBB	State, Federal or Fee	
Location				
Unit Letter	G	1650 Feet From The North	Line and	1650 Feet From The East
Line of Section	31	Township	21N	Range
			35E	Union
County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Amoco Production Company	Box 606, Clayton, NM 88415
If well produces oil or liquids, give location of lease.	Is gas actually connected? when
	Yes 5-19-86

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts II' and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

[Signature]
Clerk
5-19-86
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 1986
BY _____
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 calculation of the deviated foots 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, IV, and V 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 multiple-completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well	Gas well	Flow well	Workover	Deepen	Plug back	Some other	Other
Date Spudded	11-11-85	Date Comm. Ready to Prod.	1-2-86	Total Depth	2447	P.S.T.D.	2430		
Location (DP, R.A.B., RT, CR, etc.)	4685 G.L.	Name of Producing Formation	tubb	Top Oil/Gas Pay		Tubing Depth	1980		
Perforations								Depth Casing Shoe	
2103-21, 2133-48, 2152-65, 2171-78, 2181-2202, 2205-28									
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4		9-5/8		702		116 SX Class U			
8-3/4		7		2447		280 SX Class U			
		3 1/2		1980					

V. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of load off and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First Flow Oil Run To Tanks	Date of Test	Producing Method (flow, pump, gas lift, etc.)	
Length of Test	Testing Procedure	Casing Pressure	Casing Size
Actual Press. During Test	Oil-Data.	Water-Data.	Gas-MCF

GAS WELL

Actual Press. Test-MCF/D	Length of Test	Delta. Condensate/MMCF	Gravity of Condensate
2768	24 hrs	0	N/A
Testing Method (flow, back prod)	Tubing Pressure (Gauge-10)	Casing Pressure (EDCT-10)	Casing Size
flw	89 psi	0	N/A