



Amoco Production Company (USA)
P.O. BOX 606
CLAYTON, NM 88415

May 7, 1986

NOTICE OF GAS CONNECTION

THIS IS TO NOTIFY THE OIL CONSERVATION DIVISION THAT CONNECTION
FOR PURCHASE OF GAS FROM AMOCO PRODUCTION COMPANY'S BRAVO DOME CARBON
DIOXIDE GAS UNIT WELL NO. 1935 091K, METER STATION NO. 632256, LOCATED
IN UNIT LETTER K, SECTION 9, TOWNSHIP 19 NORTH, RANGE 35 EAST, UNION
COUNTY NEW MEXICO, BRAVO DOME 640 ACRE AREA WAS MADE ON MAY 5, 1986
BY AMOCO PRODUCTION COMPANY. FIRST DELIVERY DATE: MAY 6, 1986.

Purchaser: AMOCO PRODUCTION COMPANY
Representative: *Ann Groland*
Title: Clerk

CC: AMOCO - HOBBS,NM

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF WELLS REQUESTING	
DISTRICT	
SANTA FE	
FILE	
U.S.D.I.	
LAND OFFICE	
TRANSPORTER	☒ OIL
	☒ GAS
OPERATOR	
PRODUCTION COMPANY	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 12-21-83
Format 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. **Operator**
Amoco Production Company

Address
P.O. Box 68, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

☐ New Well	☐ Change in Transporter of:	☐ Gas Connection Notice
☐ Recompletion	☐ Oil	☐ Dry Gas
☐ Change in Ownership	☐ Casinthead Gas	☐ Condensate

Other (Please explain)

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

II. DESCRIPTION OF WELL AND LEASE

Lease No. BDDGU 1935	Well No. 091K	Pool Name, including formation TUBB	Kind of Lease State, Federal or Fee	fee	Lease
Location					
Unit Letter <u>K</u> ; <u>2310</u> Feet From The <u>south</u> Line and <u>2310</u> Feet From The <u>west</u>					
Line of Section <u>9</u> Township <u>19N</u> Range <u>35E</u> , N.M.P.M. Union					

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 Casinthead 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 tanks.	Is gas actually connected?
Unit <u>Sec.</u> <u>Sp.</u> <u>Age.</u>	Yes <u>5-5-86</u>

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

NOTE: Complete Parts III 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 examined with and that the information given is true and complete to the best of my knowledge and belief.

Jim Golden
Clerk
5-7-86
(Date)

OIL CONSERVATION DIVISION
APPROVED 5-12 BY Reg. E. Johnson
TITLE DISTRICT SUPERVISOR

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the device 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 recompleting 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 multi-completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well	Gas well	New well	Redrill	Deepen	Plug back	Same as prev.	Other
			X						
Date completed	Date Compl. Ready to Prod.		Total Depth		Perfor. D.				
11-23-85	1-10-86		2380		2350				
Drill pipe (OD, RAB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
4620	G.L. tubb				1935				
Perforations: 2099-2108, 2117-27, 2130-43, 2146-59, 2166-71, 2173-90, 2193-2206, 2207-20, 2222-25, 2227-36, 2238-42, 2248-55, 2260-82						Depth casing base			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/2	9-5/8		704		390 SX Class H				
8-3/4	7		2380		650 SX Class H				
	3 1/2		1935						

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of liquid oil and must be equal to or exceed top of allowable for this depth or be for full 24 hours)

Date First Now Oil Run To Tests	Date of Test	Producing Method (flw, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil/Gas	Water/Gas	Gas/MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
2444	24 hrs	3 blw	N/A
Testing Method (flw, back pr.)	Tubing Pressure (Gauge-12)	Casing Pressure (Gauge-12)	Choke Size
flw	82 psi	0	N/A