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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

(Deviation Surveys attached)

Operator Amoco Production Company ✓		RECEIVED	
Address BOX 68, HOBBS, N. M. 53240		MAY 20 1971	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	<input type="checkbox"/> O. C. C.
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/> Dry Gas
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input checked="" type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name STATE EK 5	Well No. Pool Name, including Formation DOUBLE L QUEEN	Kind of Lease State, Federal or Foreign STATE	Lease No. K-5652-2
Location Unit Letter F, 1980 Feet From The NORTH Line and 1650 Feet From The WEST			
Line of Section 25 Township 14-S Range 29-E, NMPM, CHAVES County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
THE PERMIAN CORP (TRUCKS)	MIDLAND TEXAS		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
PHILLIPS PETROLEUM CO	BARTLESVILLE OKLA		
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 25	Twp. 14
	Rge. 29	Is gas actually connected? YES	When 5-17-71

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X			X					
Date Spudded 5-3-71	Date Compl. Ready to Prod. 5-9-71		Total Depth 1942'		P.B.T.D. 1919'			
Elevation (OP, RKB, RT, GR, etc.) 3823' R.D.B.	Name of Producing Formation QUEEN		Top Oil/Gas Pay 1900		Tubing Depth 1913'			
Perforations 1900-03, 1907-12					Depth Casing Shoe 1942'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11"	CASING & TUBING SIZE 8 5/8"		DEPTH SET 360'		SACKS CEMENT			
7 7/8"	4 1/2"		1942-1492		275 Sx. 200 Sx.			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

Date First New Oil Run To Tanks 5-17-71	Date of Test 5-18-71	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 225	Oil - Bbls. 155	Water - Bbls. 70 BLW	Gas - MCF NA

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

(Signature)

AREA SUPERINTENDENT

(Title)

(Date)

5-18-71

OIL CONSERVATION COMMISSION

MAY 20 1971

APPROVED

BY

TITLE

OIL AND GAS INSPECTOR

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.

CLA-NMCCC-ART

1-1113

1-OBP

1-JCL

1-SUSP

1-KRY