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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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 - BACK SIDE >
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Operator Amoco Production Company ✓		DEC 12 1973
Address BOX 68, HOBBS, N. M. 88240		O. C. C.
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change In Ownership <input type="checkbox"/> Change In Transporter of: Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		Other (Please explain) ARTESIA, OFFICE

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name HONDO FED GAS COM	Well No. 1	Pool Name, including Formation LOGAN DRAW MORROW (EXT)	Kind of Lease State, Federal or Fee FED	Lease No. 11-067849
Location Unit Letter J ; 1650 Feet From The SOUTH Line and 2310 Feet From The EAST Line of Section 27 Township 17-S Range 27-E , NMPM, EDDY Co. N/M 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"/> Amoco Prod. Co. (TRUCKS)	Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston Texas			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> LLANO, Inc.	Address (Give address to which approved copy of this form is to be sent) HOBBS, N. M.			
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 27	Twp. 17	Rge. 27
	Is gas actually connected?		When 12-7-73	

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'tv.	Diff. Res'tv.
		X	X					
Date Spudded 9-5-73	Date Compl. Ready to Prod. 10-21-73		Total Depth 9778'		P.B.T.D. -			
Elevations (DF, RKB, RT, GR, etc.) 3422' RDB	Name of Producing Formation Morrow		Top Oil/Gas Pay 9314'		Tubing Depth 9239'			
Perforations 9314-35, 9474-77, 9528-31, 3745, 4/2JSPF					Depth Casing Shoe 9778'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	11 3/4"		21'		Circ			
11"	8 5/8"		1792'		8355 Circ			
7 7/8"	5 1/2"		9778'		375 SX			
	2 7/8"		9239' thru 9236'					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D CAOF 8364	Length of Test 4 Hr	Bbls. Condensate/MMCF 12	Gravity of Condensate 54
Testing Method (pitot, back pr.) 4-PT	Tubing Pressure (Shut-in) 2772	Casing Pressure (Shut-in) 1400	Choke Size VARIOUS

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.

RAY RYAN (Signature) ADMINISTRATIVE ASSISTANT (Title) DEC 10 1973 (Date)	
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OIL CONSERVATION COMMISSION

DEC 12 1973

APPROVED _____, 19____
BY **W. A. Gussert**
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

DEVIATION SURVEYS

<u>DEPTH</u>	<u>DEGREES</u>
495	1/4
800	3/4
1090	1 3/4
1295	3/4
1589	1 1/4
1792	1 -
2120	1 3/4
2603	3/4
3100	"
3500	"
3992	1 -
4470	1 -
4960	1 -
5443	3/4
6397	1/4
6870	"
7367	1/2
8119	1 -
8663	1 1/4
9580	1 -
9764	2 -

The above are true to the best of my knowledge & belief.

R. R. Yorkum
ADMINISTRATIVE ASSISTANT

Sworn and subscribed to this date, December 10, 1973.

My Commission expires 4-1-1977 Nadine Loulady
Notary Public In & For Lea Co. N.M.
~~My Commission Expires 6-1-76~~