NO. OF COPIES RECEIVED		4	
DISTRIBUTION			
SANTA FE		1	
FILE		1	V
U.S.G.S.			
LAND OFFICE		<u> </u>	L
TRANSPORTER	OIL	\$	
	GAS	1.	
OPERATOR		1	
PRORATION OFFICE			

}	DISTRIBUTION  SANTA FE /	REQUEST F	INSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  OIL S GAS /.  (DEVIATION SURVEYS ON BACK)			
	TRANSPORTER GAS /.				
1.	OPERATOR / PRORATION OFFICE Operator		DEC	17 1976	
	Amoco Production Comp	Amoco Production Company			
	P. O. Drawer "A", Le Reason(s) for filing (Check proper box)	evelland, TX 79336	Other (Please explain)	I. C. C.	
	New We!1  Recompletion  Change in Ownership	Change in Transporter of: Oil Dry Gas Casinghead Gas Condens			
	If change of ownership give name and address of previous owner				
11.	DESCRIPTION OF WELL AND I	EASE Well No. Pool Name, Including/For	ormation Kind of Leas	Lease No.	
	Lease Name Empire South Deep Unit G	- Williams	State Federa	lorFee Federal LC-062407	
	Location Col	m	e and Feet From	The West	
	22	nship 17-S Range 29	-E , NMPM, Eddy	County	
111	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S		
LLR.	Name of Authorized Transporter of Oil	or Condensate	Address (Othe unit 233 to which appro		
	Name of Authorized Transporter of Cas		Address (Give address to which appro	ned copy of this form is to be sent) 11ips Bldg, Odessa, TX	
	Phillips Petroleum Co	mpany Unit Sec. Twp. Rge.		79761	
	If well produces oil or liquids, give location of tanks.	L 33 17 29	-Ho yes	1-7-77	
If this production is commingled with that from any other lease or pool, give commingling order number:  IV. COMPLETION DATA  Oil Well   Gas Well   New Well   Workover   Deepen   P.				Plug Back   Same Res'v.   Diff. Res'v.	
	Designate Type of Completio		X	P.B.T.D.	
	Date Spudded 2-22-76	Date Compl. Ready to Prod. 12-8-76	Total Depth 11180'	10265'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay 10160'	Tubing Depth 10157'	
	3547 GR	Strawn	10100	Depth Casing Shoe	
	10160 - 10164 8	10170 - 10177	D CEMENTING RECORD	11/1/	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	17-1/2"	13-3/8"	394'	400	
	12-1/4"	9-5/8"	2930'	2000	
	8-3/4"	5-1/2"	11179'	2878	
•	. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	10157 after recovery of total volume of load of	l and must be equal to or exceed top allow	
Y	OIL WELL  Date First New Oil Run To Tanks	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas-MCF	
				- Partial	
	GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. Test-MCF/D	Length of Test  24 Hrs.	8	51.2	
	295 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Meter Run	2500	NA NA	48/64	
V	I. CERTIFICATE OF COMPLIAN	iCE .	OIL CONSERV	ATION COMMISSION	
		regulations of the Oil Conservation with and that the information given		1 3 1977 . 19	
above is true and complete to the best of my knowledge and			DISTRICT II		
)   ا	1 - NMOCC, Art.  TITLE <u>SUPERVISOR</u> , DISTRICT, II  TOTAL SUPERVISOR DISTRICT, II				
	This form is to be illed in compilation with the			n compliance with RULE 1104.	
1 - Suspense Ray W. Co.				If this is a request for allowable for a newly drilled or deepenewell, this form must be accompanied by a tabulation of the deviation with some must be accompanied by a tabulation of the deviation.	
	(54)	RATIVE ASSISTANT	Il anne estan on the Well IN SC	cordance with RULE 111.	

(Title) 12-16-76 (Date)

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.

## DEVIATION SURVEYS

DEPTH (FEET)	ANGLE	OF INCLINATION (DEGREES)
200		3/4
390		3/4
890 1390	•	3/4
1610		3/4
2020		3/4
2210		1-1/4 1-1/4
<b>24</b> 00 <b>270</b> 0		1-1/2
2929		1
3220		1 1/4
3700		1-1/4 1-3/4
3800 3975		2
4170	•	2
4470		1-3/4
4560		1-3/4 1-1/2
4800 4960		2-1/4
5145		3
5300	This information is thus to the best of	3-1/2
5396	This information is true to the best of my knowledge.	4 4-1/2
5460 5526	$\rho$	4-3/4
5580	- Kay W Cox	4-1/2
5630	Ray/W. Cox	4-1/2 4-3/4
5711	Administrative Assistant Amoco Production Company	4-3/4 4-1/2
5805 5900	and the date of the company	4-1/2
6000		4-1/2
6084		4 4
6184 6302		4
6330		3-3/4
6501	Sworn and subscribed to this date, December 16, 1976	3-3/4 4-1/2
6553 6623	1 / December 16, 1976	4-3/4
6650	Lune (1 Al aga	4-3/4
6716	Notary Public in and for	4-3/4 4-1/2
6779 6832	Hockley County, Texas	4-3/4
6906	January, Tenus	4-1/2
6960		4-3/4
7032	•	5 <b>4-</b> 3/4
7090 7 <b>1</b> 48	•	4-3/4
7175		4-3/4
7260		4-3/4 5
7305 7360		4-3/4
7465		4-1/2
<b>753</b> 0		4-3/4 4-3/4
7560 7620		4-3/4 4-3/4
7683		4-3/4
7746		4-1/2 4-3/4
7813 7875		5
7875 <b>7</b> 934	<u>1                                    </u>	4-1/2
<b>79</b> 95		5
8065	*•• ,	4-3/4 5
8130 8255	en e	5
8310		4-3/4
8404		4-1/2 3-3/4
8528 8650		3-3/4
8979		3
9337		2-1/2 2
10020 11175		1-3/4
		2-1/2