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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

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APR 19 1977

Operator AMOCO PRODUCTION COMPANY	
Address P.O. DRAWER A, LEVELLAND, TEXAS 79336	
O.C.C. ARTESIA, OFFICE	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Designate
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
	Dry Gas <input checked="" type="checkbox"/>
	Condensate <input checked="" type="checkbox"/>

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name EMPIRE SOUTH DEEP UNIT	Well No. 10	Pool Name, Including Formation SOUTH EMPIRE MORROW	Kind of Lease State, Federal or Fee STATE	Lease No. E-1284-3
Location				
Unit Letter G : 1980 Feet From The NORTH Line and 1980 Feet From The EAST				
Line of Section 1 Township 18-S Range 28-E, NMPM, EDDY County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
NAVAJO CRUDE OIL PURCHASING CO. (TRUCKS)	P.O. DRAWER 175, ARTESIA N.M. 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
TRANSWESTERN PIPELINE COMPANY	Suite 614 1st Nat'l Bank Bldg. Odessa, Texas
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit G Sec. 1 Twp. 18 Rge. 28	YES 4-12-77

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

V. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Perforations		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					

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

I. 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.

44-NMOC-ART 1-Div. 1-JEL 1-JMG 1-Susp. 1-RC 20-Partners	Ray W. Cox (Signature) Administrative Assistant (Title) 4-18-77 (Date)
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OIL CONSERVATION COMMISSION APR 19 1977	
APPROVED	19
BY	W. A. Gussert
TITLE	SUPERVISOR, DISTRICT 8
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 logs 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, B, III, and VI for changes of owner well name or number, or transporter or other such change of condition.	