| 114 | STATE OF NEW MEXICO TRAY AND MINERALS DEPARTMENT | OIL CONSERVATION DIVISION | | | | Form C-104 Revised 10-1-78 | | | |
|-----|---|---|---|---------------------------------|---------------------------------|--|--|--|--|
| | DISTRUMUTION P. O. DOX 2008 JANTA PE 1 SANTA FE, NEW MEXICO 87501 | | | RECEIVED | al X | | | | |
| | FILE I U.O.S. I LAND OFFICE I TRANSPORTER OIL OAN I | AUG 21 1980 | | | | | | | |
| ł. | PROBATION PERCEN | ARTESIA, OFFICE | | | | | | | |
| | Amoco Production (| | | | | | | | |
| | P. O. Box 68 | | | | | | | | |
| | Presson(s) for filing (CArck proper box) Other (Please explain) New Well Image in Transporter of: Other (Please explain) Hecompletion Other Dry Gas Change in Ownership Casinghead Gas Condensate | | | | | | | | |
| | If change of ownership give name and address of previous owner | | | | | ······································ | | | |
| 11. | Lease Name State IL Com. | Wildcat Morrow | <u>.</u> | Kind of Lease State, Federal | or Foo State | Loare No. | | | |
| | Unit LetterG : 1980 Feet From The North Line and 1980 Feet From The East | | | | | | | | |
| | Line of Section 3 Township 19-S Range 24-E , NMPM, Eddy Cou | | | | | | | | |
| п. | DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil | cr Condensate | Address (Give address | | ed copy of this form is to | | | | |
| | Name of Authorized Transporter of Cas El Paso Natural Ga | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, TX 79978 Is gas actually connected? | | | | | | | |
| | If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: | | | | | | | | |
| | If this production is commingled wit COMPLETION DATA | Plug Back Same Rest | Diff. Hesty | | | | | | |
| | Designate Type of Completion - (X) | | New Well Workover | Deepen I | I I I I I P.B.T.D. |) | | | |
| | Date Spudded 6-4-80 | Date Compl. Ready to Prod. 7-28-80 | 8967 ' | | 8923' | | | | |
| - | Elevations (DF, RKB, RT, GR, etc.) 3751.2 | ame of Producing Formation Morrow | Top Oil/Gas Pay 8617' | | Tubing Depth 85141 | | | | |
| | Perforations 8617'-8636' | Depth Casing Shoe | | | | | | | |
| | | D CEMENTING RECOR | | SACKS CEME | ENT | | | | |
| | HOLE SIZE | CASING & TUBING SIZE | 395 | <u> </u> | 425 Class C | | | | |
| | 12-1/4" | 9-5/8" | 1500 | | 800 Lite, 600 | Class C | | | |
| | 8-3/4" | 5-1/2" | 8966 | • | 1875 Lite, 625 | Class_H | | | |
| | | 27/6" | 8514 | me of load oil (| i and must be equal to or ex | ceed top allow | | | |
| v. | TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top al able for this depth or be for full 24 hours) OIL WELL able 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 | Oll-Bbls. | Water - Bbls. | | Gas+MCF | | | | |
| | | | | | | | | | |
| | GAS WELL Actual Frod. Toal-MCF/D | Length of Test | Bbla. Condensate/MMC | F | Gravity of Condensate | | | | |
| | 1400 | 24 hr. | Cosing Pressure (Shut | -10) | Chose Size | | | | |
| | Flowing Method (pitor, back pr.) | Tubing Presewe (ghut-in) | | | 24/64" | | | | |
| | CERTIFICATE OF COMPLIANC -Susp 1-LBG 1-W. Sta | DIL CONSERVATION DIVISION APPROVED JAN 2 3 1321 11-9. Siesset | | | | | | | |
| | I hereby certify that the rules and r | | | | | | | | |
| | above is true and complete to the | TITLE | | | | | | | |
| | -HNG 1-Perry Gas 1-R -Coquine 1-Patrick Pet | | | | | | | | |
| • | Porte 1 | aus | If this is a request for allowable for a newly dilled or despen- well, this form must be accompanied by a tabulation of the deviati- tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow- able on new and recompleted wells. | | | | | | |
| • | (Signa | itwe) | | | | | | | |
| - | Administ | rative Analyst | | | | | | | |
| | (Tir | /•) 20-80 | | | | | | | |
| | | | Separate Forms C-104 must be filed for each pool in multiple | | | | | | |
| | | | completed wells. | completed wells. | | | | | |

OIL CONSERVATION DIVISION P. O. DRAWER DD ARTESIA, NM 88210

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RECEIVED

| NOTICE OF GAS CO | ONNECTION | JAN 231981 | DATE | 1/21/81 | |
|------------------|-----------------|---------------------------------------|----------------------------|------------------|--|
| | | 6/11 9 0 1001 | | | |
| | ··· . | O. C. D. | · • | | |
| This is to noti: | fy the Oil Cons | that connection for | onnection for the purchase | | |
| of gas from the | Amoco I | Production Company OPERATOR | | | |
| State "IL" Com | n. #1 | • | Eddy | G 3-19S-24E | |
| LEASE | 6 WELL | · · · · · · · · · · · · · · · · · · · | COUNTY | UNIT S-T-R | |
| Wildcat Morrow | 7 | | El Paso Natural | Gas Co. | |
| POOL | | | NAME OF PURCHASE | R | |
| was made on | January 21, | 1981 | 30163 | , 01 | |
| | DATE | | SITE CODE | SITE WELL NUMBER | |
| - | · . | · · | | | |

El Paso Natural Gas Co. PURCHASER

REPRESENTATIVE ue

Assistant Chief Division Dispatcher

TITLE

.

MHM: b1 cc: Operator Oil Conservation Division - Santa Fe, NM H. E. Logan N. E.McEuen Proration Measurement - Jal R.L.Tabb Earl Smith File