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U.S.G.N.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

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

JUL 26 1974

Amoco Production Company

O. C. C.
ARTESIA, OFFICE

BOX 68, HOBBS, N. M. 88240

Reasons for filing (Check proper box)

New well	<input type="checkbox"/>
Recompletion	<input type="checkbox"/>
Change in ownership	<input type="checkbox"/>

Change in Transporter of:
Oil ☒ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Formerly, The Permian Corp (TRKS)
Eff. 8-1-74

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
BIG EDDY UNIT FEO	11 BIG EDDY-DELAWARE	State, Federal or Fee FED	NM-0251
Unit	Feet From The	Line and	Feet From The
I	1650	SOUTH	660 EAST
Line 1 Section	Township	Range	County
7	20-S	31-E	EDDY

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Designated 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)					
Amoco Production Company (TRUCKS)	Box 1183, HOUSTON, TEXAS 77001					
Designated Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Well is produced oil or liquids, except natural tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	I	7	20	31	No	

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 of Address	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (I.P., 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 (pitot, 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.

Ray R. Yorkum
ADMINISTRATIVE ASSISTANT

JUL 23 1974

(Date)

OIL CONSERVATION COMMISSION

JUL 26 1974

APPROVED _____, 19

BY *W. A. Gressett*

OIL AND GAS INSPECTOR

TITLE _____

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 tested wells.