

SALE AREA	/	/
FILE	/	/
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR	/	
REGISTRATION OFFICE		

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

Form O-104
Supersedes OIL O-104 and O-105
Effective 1-1-65

RECEIVED

DEC 19 1978

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	☐	Change in Transporter of	
Recompletion	☐	Oil	☒
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)
Leasehold Drilled

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

DESCRIPTION OF WELL AND LEASE

Lease Name Big Eddy Unit	Well No. 11	Pool Name, including Formation Big Eddy - Delaware	Kind of Lease State, Federal or Free Fed	Lease No. NM0251
Location Unit Letter: I ; 1650 Feet From The South Line and 660 Feet From The East Line of Section 7 Township 20-S Range 31-E, NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ The Permian Corporation (trucks)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Full Reservoir
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

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of liquid 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 (flow, 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.

Russ Evans
(Signature)
Assistant Administrative Analyst
(Title)
December 14, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 20 1978
BY *W. A. Gressett*
TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or reworked well, this form must be accompanied by a tabulation of the overflow tests taken on the well in accordance with RULE 110.
All portions of this form must be filled out completely for oil and gas wells and recompleting wells.
Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of data.