

|                   |     |
|-------------------|-----|
| DISTRIBUTION      |     |
| SANTA FE          | 5   |
| FILE              | ✓   |
| U.S.G.S.          |     |
| LAND OFFICE       |     |
| TRANSPORTER       | OIL |
|                   | GAS |
| OPERATOR          | 1   |
| PRODUCTION OFFICE |     |

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-105  
Effective 1-1-65

RECEIVED

NOV - 9 1978

|                                                    |                                                                             |
|----------------------------------------------------|-----------------------------------------------------------------------------|
| Operator<br>Amoco Production Company               |                                                                             |
| Address<br>P.O. Drawer "A", Levelland, Texas 79336 |                                                                             |
| Reason(s) for filing (Check proper box)            |                                                                             |
| New Well <input checked="" type="checkbox"/>       | Change in Transporter of:                                                   |
| Recompletion <input type="checkbox"/>              | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>               |
| Change in Ownership <input type="checkbox"/>       | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| Other (Please explain)                             |                                                                             |

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

|                                                                           |               |                                                    |                                               |                    |
|---------------------------------------------------------------------------|---------------|----------------------------------------------------|-----------------------------------------------|--------------------|
| Lease Name<br>State EP Com                                                | Well No.<br>1 | Pool Name, Including Formation<br>Wildcat - Strawn | Kind of Lease<br>State, Federal or Free State | Lease No.<br>L-487 |
| Location                                                                  |               |                                                    |                                               |                    |
| Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East |               |                                                    |                                               |                    |
| Line of Section 21 Township 20-S Range 28-E NMPM, Eddy County             |               |                                                    |                                               |                    |

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) |            |
| The Permian Corp. (Trucks)                                                                                               | P.O. Box 1183 Houston, Texas                                             |            |
| 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) |            |
| El Paso Natural Gas Co.                                                                                                  | P.O. Box 1492 El Paso, Texas                                             |            |
| If well produces oil or liquids,<br>give location of tanks.                                                              | Unit<br>J                                                                | Sec.<br>21 |
|                                                                                                                          | Twp.<br>20                                                               | Rge.<br>28 |
|                                                                                                                          | Is gas actually connected? Yes                                           |            |
|                                                                                                                          | When 10-27-78                                                            |            |

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 Resv. | Diff. Resv. |
|                                                 |                                        | X        | X                        |          |                       |           |            |             |
| Date Spudded<br>12-29-77                        | Date Compl. Ready to Prod.<br>10-27-78 |          | Total Depth<br>11460     |          | P.B.T.D.<br>10415'    |           |            |             |
| Elevations (DF, RKB, RT, GR, etc.)<br>3235.9 GR | Name of Producing Formation<br>Strawn  |          | Top Oil/Gas Pay<br>10258 |          | Tubing Depth<br>10201 |           |            |             |
| Perforations<br>10258 - 10266                   |                                        |          |                          |          | Depth Casing Shoe     |           |            |             |

TUBING, CASING, AND CEMENTING RECORD

|           |                      |           |                          |
|-----------|----------------------|-----------|--------------------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT             |
| 17 1/2"   | 13 3/8"              | 397       | 400 SX Incon             |
| 12 1/4"   | 9 5/8"               | 2980      | 2100 Sx Howcolite Class  |
| 8 3/4"    | 5 1/2"               | 11458     | 2400 SX TRINITY Lite Cla |
|           | 2 3/8"               | 10201     | H                        |

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 |
| 1940                             | 24 Hours                  | 0                         | 52.6                  |
| Testing Method (pilot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size            |
| Back Pressure                    | NA                        | NA                        | 16/64"                |

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.

0+4-NMOCB-Art

1-Div

1-Susp

1-RC

1-Pennzoil

1-Petroleum

Reserve

Administrative Supervisor

(Title)

11-7-78

(Date)

OIL CONSERVATION COMMISSION

NOV 15 1978

APPROVED

BY W. A. Gussett

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 deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All portions of this form must be filled out completely for allowable on new and re-completed wells.

Fill out only portions I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

## OIL CONSERVATION COMMISSION

RECEIVED

P. O. DRAWER DD

NOV - 9 1978

ARTESIA, NEW MEXICO 88210

O. C. C.  
ARTESIA, OFFICE

## NOTICE OF GAS CONNECTION

DATE November 7, 1978

This is to notify the Oil Conservation Commission that connection for the purchase  
of gas from the Amoco Production Company ✓,

|                                                                        |                         |   |          |
|------------------------------------------------------------------------|-------------------------|---|----------|
| State EP Com.                                                          | #1                      | J | 21-20-28 |
| LEASE                                                                  | WELL & UNIT             |   | S.T.R.   |
| <i>Wildcat</i><br>Undesignated Strawn                                  | El Paso Natural Gas Co. |   |          |
| POOL                                                                   | NAME OF PURCHASER       |   |          |
| <i>First delivery on 11-6-78</i><br>was made on <u>October 3, 1978</u> | 25949                   |   |          |
|                                                                        | SITE CODE               |   |          |

El Pasq Natural Gas Co.PURCHASER*Francis B. Elliott*  
REPRESENTATIVEGas Production Status AnalystTITLE

TRE:bl

cc: Operator  
Oil Conservation Commission - Santa Fe  
H. P. Logan  
T. J. Crutchfield  
Proration  
File