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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION 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-110
Effective 1-1-65

JUL 21 1981

1081

Operator Amoco Production Company		Address P. O. Box 68, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Deviation Survey attached	
Recompletion <input type="checkbox"/>			
Change in Ownership <input type="checkbox"/>			

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State IM Com.	Well No. 1 Pool Name, including Formation Happy Valley and Morrow	Kind of Lease State, Federal or Fee	Lease No. LG-5359
Location Unit Letter I 1880 Feet From The South Line and 660 Feet From The East Line of Section 16 Township 22-S Range 26-E, NMPM, Eddy County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Permian Corporation	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 <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, TX 79978		
If well produces oil or liquids, give location of tanks.	Unit I Sec. 16 Twp. 22 Rge. 26	Is gas actually connected? No - yes	When 8-26-81

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't.	Diff. Res't.
		X	X					
Date Spudded 10-10-80	Date Compl. Ready to Prod. 6-19-81	Total Depth 11904'	P.B.T.D. 11840'					
Elevations (DF, RKB, RT, GR, etc.) 3580.2 ft	Name of Producing Formation Morrow	Top Oil/Gas Pay 11346'	Tubing Depth 11246'					
Perforations 11346-11542'			Depth Casing Shoe 11904'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	687'	730 SX Class C					
12-1/4"	9-5/8"	2878'	975 SX Lite, 200 SX					
			Thixomont, 100 SX Class C					
8-3/4"	5-1/2"	11904'	1500 SX Class H, 1500 SX					
			Lite, 200 SX Class H					

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 6-19-81	Date of Test 6-19-81	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24	Tubing Pressure 675	Casing Pressure	Choke Size 14/64
Actual Prod. During Test	Oil - Bbls. 1	Water - Bbls. 0	Gas - MCF 1020

GAS WELL

Actual Prod. Test-MCF/D 1020	Length of Test 24 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 675 Flow	Casing Pressure (Shut-in)	Choke Size 14/64"

VI. CERTIFICATE OF COMPLIANCE

0+4-NMOCD, A
1-Hou 1-Susp 1-W. Stafford, Hou 1-GPM

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.

Greg Mitchell
(Signature)

Admin. Analyst

(Title)

7-7-81

(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 20 1981
BY W. A. Gressett
TITLE SUPERVISOR, DISTRICT VI

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 completed wells.