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| FILE | | |
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| 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

<DEVIATION SURVEYS - BACK>
RECEIVED

I. Operator
AMOCO PRODUCTION COMPANY
Address
P.O. DRAWER A, LEVELLAND, TEXAS 79338
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain) A. TESIA, OFFICE
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 7-15-76
UNLESS AN EXCEPTION TO Rule 306
IS OBTAINED

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---------------------------|----------|--------------------------------|----------------------------|-------------------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| OLD INDIAN DRAW UNIT EDDY | 9 | INDIAN DRAW - DELAWARE | State, Federal or Fee FED. | AM 4415688-A |
| Location | | | | |
| Unit Letter | P | 1008 Feet From The | SOUTH Line and | 994 Feet From The |
| Line of Section | | 18 | Township | 22-S |
| Range | | 28-E | NMPM, EDDY County | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|------|------|------|----------------------------|------|
| Name of Authorized 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) | | | | | |
| THE PERMIAN CORP (TRUCKS) Permian (Eff) | P.O. Box 1183 HOUSTON, TEX. | | | | | |
| Name of Authorized 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) | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When |
| | J | 18 | 22 | 28 | No | |

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

IV. COMPLETION DATA

| | | | | | | | | |
|--------------------------------------|-----------------------------|----------|-----------------|----------|-------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| | X | | X | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | |
| 4-28-76 | 5-15-76 | | 3450' | | 3410' | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | Tubing Depth | | | |
| 3074.3 GL | DELAWARE | | 3265' | | 3299' | | | |
| Perforations | | | | | Depth Casing Shoe | | | |
| 3265 - 3283 w/ 2 JSPF | | | | | 3450' | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 14 3/4" | 10 3/4" | | 438' | | 500 SX | | | |
| 7 7/8" | 5 1/2" | | 3450' | | 950 SX | | | |

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.) | |
| 5-15-76 | 5-16-76 | Pump | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| 24 | | | |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - MCF |
| 106 | 91 | 15 | TSTM |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MCF | 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.

OIL CONSERVATION COMMISSION
MAY 28 1976

APPROVED
BY W. A. Gussett, Jr.

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 gas and oil-bearing wells.

This form must be filed for changes of owner, well name or location, or transportation by other such change of condition. Separate forms must be filed for each pool in multiple

913-NMOC - ART

1-Div
1-Susp
1-JEL
1-DBP
1-EC
2-BASS
1-MANATHON

Ray W. Cox
(Signature)

Administrative Assistant

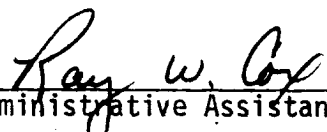
(Title)

5-25-76

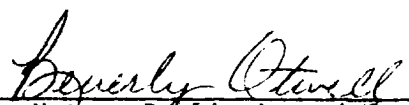
(Date)

| <u>Depth - Feet</u> | <u>Deviation - Degree</u> |
|---------------------|---------------------------|
| 255 | 1/4 |
| 438 | 3/4 |
| 775 | 3/4 |
| 933 | 3/4 |
| 1091 | 3/4 |
| 1217 | 1 3/4 |
| 1404 | 1 1/2 |
| 1560 | 1 1/4 |
| 1718 | 2 |
| 1876 | 2 1/4 |
| 2096 | 3 1/2 |
| 2254 | 3 |
| 2360 | 2 3/4 |
| 2602 | 3 1/2 |
| 2760 | 3 1/2 |
| 3012 | 3 |
| 3450 | 2 3/4 |

The above are true to the best of my knowledge.


Administrative Assistant

Sworn to this date, May 26, 1976


Notary Public in and for
Hockley County, Texas
My Commission expires June 1, 1977.