NO. OF COPIES RECEIVED	,			
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C+104 Supersedes Old C-104 and C+110	
SANTA FE				
FILE	AND Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE		· · · · · ·	ACCEIVED	
TRANSPORTER GAS	(DEVIATION)	URVEYS · ATTACHE	DHELEIVLL	
OPERATOR /	•		AUG 1 2 1976	
1. PRORATION OFFICE				
AMOCO PRODUCTION C	OMPANY		0. C. C.	
Address	116	_	ARTESIA, OFFICE	
P.O. DRAWER A, LEVELLAND, TEXAS 79: Reason(s) for filing (Check proper box)		Other (Please explain)	NUCT NOT BE	
New We!1	Change in Transporter of:	CASINGHEAD GAS	MUST NOT BE	
Recompletion Change in Cwnership	Oil Dry Gas Casinghead Gas Condensat	• LINIESS AN EXCI	PININ Repetere	
		IS OBTAINED	J -187	
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND L	EASE	Kind of Leas	e Lease No.	
Lease Name	Aeri No. Poor Hamey meretary	diton	- NM	
OLD INDIAN DRAW UNIT	11 INDIAN UKAN	DELAWARE		
Unit Letter A : 33(Feet From The NORTH Line of	and 668 Feet From	The EAST	
	026 -		EDDY County	
Line of Section 9 Town	ship CL J Range			
III. DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which appro	oved copy of this form is to be sent;	
Name of Authorized Transporter of Oil		00 Rox 1/83	HOUSTON, TEXAS	
HE FERMIAN LORI Name of Authorized Transporter of Casi	nghead Gas or Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)	
		is gas actually connected?	1en	
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	No L		
give location of tanks.	that from any other lease or pool, gi	ive commingling order number:		
If this production is comminged with IV. COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v	
Designate Type of Completion		X		
Date Spudded,	Date Compl. Ready to Prod.	Total Depth 3450	P.B.T.D. 3403	
7/5/76	8/1/76 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.) 3083.15 RDB	DELAWARE	3295	3403 Depth Casing Shoe	
Perforations			Depin Cabing and	
3295'- 3303	DELAWARE TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT 450 SK	
143/4"	10 3 4 "	402 3450 du	10 800 5×	
77/8 "	5.72			
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	it and must be equal to or exceed top allo	
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be afi able for this dep		il and must be equal to or exceed top allo	
OIL WELL Date First New,Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
8/1/76	8/9/76 Tubing Pressure	PUMPING Casing Pressure	Choke Size	
Length of Test 24 HRS	I ADIUG FIGSERIG		Gas - MCF	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls. 46	/D	
73	27	Τφ		
GAS WELL			Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		
Testing Mothed (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitor, ouch pier				
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
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.		APPROVED AUG 1 2 1976		
		a Way gresset		
above is true and complete to tr	IC DEBT OF MY KNOWLEDGE AND DELIGHT	SUPERVISOR,	DISTRICT <b>U</b>	
0 13-NMOCC-ART	Λ	TITLE	in compliance with RULE 1104.	
I-SUSP	I-SUSP LAN III (av)		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the devist	
I-RC Nuy	nature)	well, this form must be acco	cordence with RULE 111.	
I-JEL I-JMG Adminis	trative Assistant	All sections of this form	i must be filled out completely to: with	
	-11-76	Fill out only Sections	I, II, III, and VI for changes of own	