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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED

JAN 19 1992

Form C-104
Revised 1-1-89
See instructions
at Bottom of Page

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up

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Amoco Production Company Well API No. 30-015-22703

Address P.O. Box 3092, Houston, TX 77253

Reason(s) for Filing (Check proper box)

New Well ☐

Recompletion ☒

Change in Operator ☐

Change in Transporter of:

Oil ☐

Dry Gas ☐

Casinghead Gas ☐

Condensate ☐

Other (Please explain)

RE-ENTER MORROW

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Teledyne / 20 / Gas Com. Well No. 1 Pool Name, including Formation Laguna Salado Undesignated Morrow Kind of Lease State, Federal or Fee Lease No.

Location
Unit Letter C 660 Feet From The North Line and 2080 Feet From The West Line
Section 20 Township 23-S Range 29-E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Scurlock Permian Corp. or Condensate ☒ Address (Give address to which approved copy of this form is to be sent) P.O. Box 4648, Houston, TX 77210

Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Co. or Dry Gas ☒ 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 C Sec. 20 Twp. 23-S Rge. 29-E Is gas actually connected? YES When? 10/7/92

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
		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>
Date Spudded <u>7/5/80</u>	Date Compl. Ready to Prod. <u>10/7/92</u>	Total Depth <u>13370</u>	P.B.T.D. <u>13322</u>					
Elevations (DF, RKB, RT, GR, etc.) <u>2936.3 GL</u>	Name of Producing Formation <u>Morrow</u>	Top Oil/Gas Pay <u>12920</u>	Tubing Depth <u>12821</u>					
Performances <u>12920 - 12932 (4 JSPF)</u>			Depth Casing Shoe <u>13367</u>					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>20"</u>	<u>16"</u>	<u>399'</u>	<u>500 Class C</u>
<u>14 3/4"</u>	<u>10 3/4"</u>	<u>2698'</u>	<u>1625 Lite, 200 Incor.</u>
<u>9 1/2"</u>	<u>7 5/8"</u>	<u>10488'</u>	<u>1300 Lite, 1000 Class H</u>
<u>6 1/2" (liner)</u>	<u>5"</u>	<u>9982' - 13367'</u>	<u>450 Class H</u>

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	Port ID-2
			<u>1-22-93</u>
Length of Test	Tubing Pressure	Casing Pressure	Choke Size <u>P & A Ato</u>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF <u>camp Mar</u>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
<u>858</u>	<u>24 hrs</u>	<u>7</u>	<u>NA</u>
Testing Method (pilot, back pr.) <u>Sales Meter</u>	Tubing Pressure (Shut-in) <u>150 (FTP)</u>	Casing Pressure (Shut-in) <u>0</u>	Choke Size <u>20/64</u>

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Matthew C. Wines
Printed Name Matthew C. Wines Title Admin. Analyst
Date 10/13/92 Telephone No. (713) 556-3744

OIL CONSERVATION DIVISION

Date Approved JAN 12 1993

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.