

OIL CONSERVATION DIVISION

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SANTA FE, NEW MEXICO 87501

OCT 31 1980

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASO. C. S.
ARTESIAL OFFICE

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PROMOTION OFFICE	

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 checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Deviation Survey
Change in Ownership <input type="checkbox"/>	

If change of ownership give name
and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name State IH Com.	Well No. 1	Pool Name, Including Formation South Rock Tank Morrow	Kind of Lease State, Federal or Fee State	Lease No. L-4630
Location Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East Line of Section 36 Township 23-S Range 24-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"/> The Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 Houston TX 77001
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 Sec. Twp. Rge. J 36 23 24
Is gas actually connected?	When No Yes 2-18-81

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 Res't.	Diff. Res't.
		X	X					
Date Spudded 5-14-80	Date Compl. Ready to Prod. 10-20-80	Total Depth 10850'	P.B.T.D. 10240'					
Elevations (DF, RKB, RT, GR, etc.) 3873.7 GL	Name of Producing Formation Morrow	Top Oil/Gas Pay 10207'	Tubing Depth 9752'					
Perforations 10207'-10226'			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	391'	700 Class C
12-1/4"	9-5/8"	2600'	1275 Lite, 600 Class C
8-3/4"	5-1/2"	10850'	2620 Lite, 790 Class 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 1750	Length of Test 24 hr.	Bbls. Condensate/MMCF 0	Gravity of Condensate
Testing Method (pilot, back pr.) Flowing	Tubing Pressure (Shut-in) 700#	Casing Pressure (Shut-in)	Choke Size 48/64

CERTIFICATE OF COMPLIANCE 1-Terra Resources
1-Maralo 1-Union TX 1-Cities ServiceI 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.0+4-NMOCD, A 1-Hou 1-Susp 1-LBG
1-W. Stafford, Hou 1-Hammon 1-Moncrief
1-Texas Oil X Gas

(Signature)

Assist. Admin. Analyst

(Date)

10-29-80

(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 24 1981
BY W.A. Gressett
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 sections of this form must be filled out completely for allow-
able 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 multiple
completed wells.