

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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JAN 09 1981

REQUEST FOR ALLOWABLE  
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.

ARTESIA, OFFICE

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FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
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Operator  
Amoco Production CompanyAddress  
P. O. Box 68, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

Deviation survey attached

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name State IN	Well No. 1	Pool Name, Including Formation Und. Morrow BALDWIN CANYON-MORROW GAS	Kind of Lease State, Federal or Fed State	Lease No. LB-5172
Location Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line of Section 1 Township 24-S Range 24-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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co.	P. O. Box 1492, El Paso, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	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:

## 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						
Date Spudded 7-6-80	Date Compl. Ready to Prod. 11-17-80	Total Depth 10880'		P.B.T.D. 10829'					
Elevations (DF, RKB, RT, GR, etc.) 3936.7' GL	Name of Producing Formation Morrow	Top Oil/Gas Pay 10535'		Tubing Depth 10402'					
Perforations 10535'-10545'				Depth Casing Shoe 10880'					

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	400'	450 Class C
12 1/4"	9 3/8"	2700'	1300 Lite, 250 Class C
8 3/4"	5 1/2"	10880'	1600 Lite, 615 Class H
	2 3/8"	10402'	

## 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.)	
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 1570	Length of Test 24 hr.	Bbls. Condensate/MMCF 0	Gravity of Condensate
Testing Method (pilot, back pr.) Flow	Tubing Pressure (Shut-in) 375	Casing Pressure (Shut-in)	Choke Size 19/64"

CERTIFICATE OF COMPLIANCE O+4-NMOCDA 1-Hou  
1-Susp 1-LBG 1-W.Stafford, Hou 1-Moncrief  
1-El Paso, 1-Maralo 1-Hibbert 1-Scott 1-Superior  
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.

*Benton Green*  
(Signature)

Assistant Administrative Analyst

1-8-81

(Date)

## OIL CONSERVATION DIVISION

FEB 24 1981

APPROVED \_\_\_\_\_, 19

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 multiply  
completed wells.