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STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		
TRANSPORTER OIL		
TRANSPORTER GAS		
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Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: Amoco Production Company

Address: 501 Airport Drive, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate

Other (Please explain)

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name: Jicarilla Apache Tribal 125
Well No.: 10
Pool Name, Including Formation: West Lindrith Gallup Dakota
Kind of Lease: State, Federal or Fee Jicarilla ~~Federal~~
Lease: JC 125

Location
Unit Letter P : 555 Feet From The South Line and 330 Feet From The East
Line of Section 36 Township 25N Range 4W , NMPM, Rio Arriba

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐: Plateau, Inc.
Address (Give address to which approved copy of this form is to be sent): P.O. Box 489, Bloomfield, New Mexico 87413

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐: Gas Company of New Mexico
Address (Give address to which approved copy of this form is to be sent): P.O. Box 1899, Bloomfield, New Mexico 87413

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	P	36	25N	4W	Yes	11-10-83

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

NOTE: *Complete Parts IV and V on reverse side if necessary.*

VI. 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 is true and complete to the best of my knowledge and belief.

(Signature)

District Administrative Supervisor
(Title)

January 10, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 12 1984, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 110.

If this is a request for allowable for a newly drilled or well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes well name or number, or transporter, or other such change of c

Separate Forms C-104 must be filed for each pool in completed wells.

IV. COMPLETION DATA

	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff.
Designate Type of Completion – (X)	X		X					

Date Spudded 8-5-83	Date Compl. Ready to Prod. 10-7-83	Total Depth 7956'	P.B.T.D. 7906'
Elevations (DF, RKB, RT, GR, etc.) 7129' KB	Name of Producing Formation Gallup-Dakota	Top Oil/Gas Pay 6716'	Tubing Depth 7876'
Perforations 6716'-6836', 1 jspf, .5" in dia.; 6884'-6994', 1 jspf, .25" in dia., 7646'-7666', 7672'-7690', 2 jspf, .5" in dia. 7838'-7856', 4 jspf, .44" in dia. total 378 holes			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8", 24#, K-55	306'	350
7-7/8"	5-1/2", 15.5#, K-55	7956'	1450
	2.875"	7876'	

V. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of load oil and must be equal to or exceed ... able for this depth or be for full 24 hours)

OIL WELL

Date First New Oil Run To Tanks 11-10-83	Date of Test 12-25-83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure 170 psig	Casing Pressure 170 psig	Choke Size None
Actual Prod. During Test	Oil - Bbls. 12	Water - Bbls. 69	Gas - MCF 40.3

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size