		1
DISTRIBUTI		
ANTA FE		
FILE		
J.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION OFFICE		

III.

IV.

	ANTA FE	REQUEST	T FOR ALLOWABLE	MISSION	Form C-104 Supersedes Old C-104 and C-11		
	J.S.G.S.		AND		Effective 1-1-65		
	LAND OFFICE	AUTHORIZATION TO TR	RANSPORT OIL AND	NATURAL GAS			
	I RANSPORTER OIL						
	OPERATOR GAS						
1.	PRORATION OFFICE						
	Operator						
	Amoco Production Con	ipany					
	501 Airport Drive, Farmington, New Mexico 87401						
	Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well XX	Change in Transporter of:		* 4			
	Recompletion Change in Ownership	Oil Dry G	= 1				
	If change of ownership give name		ensate		,		
	and address of previous owner						
H.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including I	Formation	Kind of Lease			
	Jicarilla Apache 102	14E Basin Dakota		State, Federal or Fe	E Federal Jicarilla		
İ	Location Unit Letter M 1	10 Feet From The South	. 800	We	Apache 102		
	0	26N	ne and	Feet From The Rio Arrib			
	Line of Section 9 T	ownship ZON Range	, NMPM	, KIO ATTID	County		
II.	DESIGNATION OF TRANSPORM Name of Authorized Transporter of C	RTER OF OIL AND NATURAL G.					
Į	Plateau Inc.	or constructive (A)	4775 Indian Sc	hool Rd. NE,	oy of this form is to be sent) Albuquerque, N.M.		
	Name of Authorized Transporter of C		Address (Give address	to which approved cop	by of this form is to be \$7401		
	El Paso Natural Gas Co		Box 990, Farmi		xico 87401		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. M 9 26N 4W	Is gas actually connect	ed? When			
<u>,</u>	If this production is commingled w	with that from any other lease or pool.	give commingling order	number:			
۷.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Plug	Back Same Res'v. Diff. Res'v.		
	Designate Type of Complet	, ; A	X		John Hes V. Diff. Res.V.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.	-		
-	8/25/80 Elevations (DF, RKB, RT, GR, etc.,	10/9/80 Name of Producing Formation	8254 Top Oil/Gas Pay		230 t		
	7123' GL	Dakota	8005	i	43		
İ	Perforations			1	Casing Shoe		
-		TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	т	SACKS CEMENT		
}	12-1/4"	9-5/8"	320		Sx.		
-	8-3/4" 6-1/2"	4-1/2"	4100 t 8274 t		Sx Sx		
	<u> </u>	2-3/8"	8143'		7 52		
	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volum	ne of load oil and mus	t be equal to or exceed top allow-		
	DIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours Producing Method (Flow				
-	Length of Test				<i>y</i> _100, ₈₀₀		
	cendra or rest	Tubing Pressure	Casing Pressure		Biz		
	Actual Prod. During Test	Oii-Bbls.	Water-Bbls.		Metal		
_							
(GAS WELL			1	19 1981		
Γ	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	<u></u> \	N. COM- y of Condensors		
-	296 Testing Method (pitot, back pr.)	3 hrs. Tubing Pressure (Shut-in)		DIS	51. 3		
	Backpressure	1950 PSIG	Casing Pressure (Shut- 1955 PSIG	in) Choke	Size OH		
I. C	CERTIFICATE OF COMPLIAN	CE	OIL C	ONSERVATION	COMMISSION		
_			APPROVED MA				
С	ommission have been complied	regulations of the Oil Conservation with and that the information given best of my knowledge and belief.	Original Signed	by FRANK T. CHAVE	7 . 19		
		TITLE	usewis				
Per the Signed By			This form is to be filed in compliance with RULE 1104.				
- A SVOJODA		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 allowable on new and recompleted wells.					
(Signature)							
						March 17, 198	Fill out only Sections I. II. III. and VI for changes of owner.
(Date)			well name or number, or transporter, or other such change of condition.				