NO. OF COPIES PECI			
DISTRIBUTION			Ě
SANTA FE		1	
FILE			,
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS	1	
OPERATOR		$\coprod$	
PRORATION OFFICE			

	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C-104	
5.4	ANTA FE /	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110			
F	ILE ! ,	AND Effective 1-1-65			
U.	.s.g.s.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL O	ΔS	
L.	AND OFFICE	_ No monitority	MOTORY OF AND NATORAL C		
	OIL				
11	RANSPORTER GAS /				
	PERATOR !				
<u> </u>	··· <del>·</del>	<del>-</del>			
- L	RORATION OFFICE				
	AMOCO PRODUCTI	ON COMPANY			
		ON COLEANI			
Ad	dress		07404		
		ive, Farmington, New Mexi			
Re	ason(s) for filing (Check proper bo		Other (Please explain) Fo	ur Corners Pipeline Co.	
Ne	w Well	Change in Transporter of:		mately 75%, Giant Refining	
Re	completion	Oil Dry Gas	Inc. will run ap	proximately 25%, and	
Ch	ange in Ownership	Casinghead Gas Coien		11 purchase surplus on a	
<b>L</b>			spot sales basis	•	
	change of ownership give name				
and	address of previous owner				
II DE	SCRIPTION OF WELL AND	IFASE			
	ase Name	Weil No. Fool Name, including Fo	rmation Kind of Lease	Indian Lease No.	
		6 Tocito Dome F			
	Navajo Tribal "P"	U IOCILO DOME I	Guu. D	24 20 0p3 3033	
				_	
	Unit Letter ;	660 Feet From The South Line	e and 1980 Feet From T	The Rest	
ļ					
	Line of Section 7 To	ownship <b>26-N</b> Range	18-W , NMFM,	San Juan County	
II. DE	SIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	<u>S</u>		
No	ine of Authorized Transporter of O. Four Corners Pipeline	or Condensate	Address (Give address to which approx P. O. Box 1588, Warmin	gton. New Maxico 87401	
1 4	Cient Defining Inc	Company	P. O. Box 1588, Farmin P. O. Box 256, Farmin Address Give address to which approx	ston. New Mexico 87401	
No	Giant Refining, Inc.	asinghead Gas 📉 or Dry Gas 🔃	Address Give address to which approv	ed copy of this form is to be sent)	
	Plateau, Inc.		P. O. Box 108, Farmin	gton, New Mexico 87401 mington, New Mexico 8740	
	Amoco Production Comp	Unit Sec. Twp. Ege.	[s gas actually connected? Whe	mangony New Months of the	
	well produces oil or liquids, ve location of tanks.	A 20 26N 18W	Yes	6-7-75	
				9-/-/-	
	and the second s	ith that from any other lease or pool,	give commingling order number:	CTB-123	
V. <u>CC</u>	MPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.	
	Designate Type of Complet	(Y)	***		
			Total Desta	F.B.T.D.	
Do	ite Spudded	Date Compl. Ready to Prod.	• • • • • • • • • • • • • • • • • • • •		
Ĺ	4-19-75	6-7-75 Name of Producing Formation	6480	6433'	
Ele	evations (DF, RKB, RT, GR, etc.)	,		Tubing Depth	
İ	5830' GL	Pennsylvanian D	63621	6411'	
Pe	erforations			Depth Casing Shoe	
	6365-76' x 3 SPF			64801	
		TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	17-1/4"	13-3/8"	124'	135 ex	
-	11"	8-5/8"	1502*	600 ax	
<u> </u>	7-7/8"	5-1/2"	6479'	1500 sx	
	<i>I=11.</i> 6		1 W 3 1 2		
ــــا		DOD ALL OWARDS TO	for the state of t	and must be equal to at exceed ton allows	
		FOR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours)	and must be equal to be exceed top dison-	
	I, WELL ste First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	(t, etc.)	
Da			+		
	6-7-75	6-10-75	Pumping Casing Pressure	Choke Size	
L.	ength of Test	Tubing Pressure			
ŀ	20	155	Water - Bbis.	Gas - MCF	
Ac	tual Prod. During Test	Oil-Bbls.	Water - Bois.	Gd8 - MCF	
	121	74	47	296	
' <del></del> -			OIL		
G.A	AS WELL			NS i	
A	ctual Prod. Test-MCF/D	Length of Test	Bbls. Schdersate/MMCF	Gravitý of Condensate	
T	esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
'	, , , , , , , , , , , , , , , , , , , ,				
L		VOE.	OH CONSERVA	TION COMMISSION	
VI. CE	ERTIFICATE OF COMPLIA!	NCE	OIL CONSERVA		
			APPROVED	JUN /201975	
Ιh	ereby certify that the rules and	regulations of the Oil Conservation		0 10/0	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		By Original Signed by Emery C. Arnold SUPERVISOR DIST. 43			
	Original Signed by		man form in an in-filled in-	compliance with RULE 1104.	
R. E. McCLESKEY		to a state a secure for allow	ushis for a newly drilled or deepened		
			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.		
	(Sig	nature)			
Area Engineer (Title)		All sections of this form must be filled out completely for allow-			
			All sections of this form me		
	Araa Rhgino	itle)	able on new and recompleted we	8118.	
	(1	itle)	able on new and recompleted with	file.  Till and VI for changes of owner,	
	June 11, 19	itle)	Fill out only Sections I, I well name or number, or transpor	8118.	