Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

ISTRICT II O. Drawer DD, Artesia, NM 88210	•	Santa I	P.O. Bose, New Me	x 2088 xico 87504	1-2088					
ISTRICT III OU RIO Brazos Rd., Aziec, NM 87410	DECLIES?		ALLOWAB	(ATION				
	TOT	RANS	PORT OIL	AND NAT	URAL GA	.S	- K			
) регация — — — — — — — — — — — — — — — — — — —					Well API No. 300450709800					
AMOCO PRODUCTION COMPAN	<u>Y</u>									
P.O. BOX 800, DENVER, C	OLORADO 8	0201		Othe	t (Please expla					
(cason(a) for Filing (Check proper box)	Chan	ge in Tran	sporter of:		i ii ii wa cayaa				ļ	
lew Well	Oil	Dry								
hange in Operator	Casinghead Gas	☐ Cos	densate							
change of operator give name and address of previous operator										
I. DESCRIPTION OF WELL A	ND LEASE					Kind of	Lease	Le	se No.	
DRYDEN LS	Weij	No. Poo Bl	l Name, Includir LANCO MES	AVERDE (PRORATED	GASSiale, F	deral or Fee			
Location M	1015			FSL	96		From The _	FWL	Line	
Unit Letter	:	rec	t From The 8W				JUAN		County	
Section 28 Section Township		Rar		, NI	MPM,				County	
II. DESIGNATION OF TRANS	SPORTER O	F OIL	AND NATU	RAL GAS		·.				
Name of Authorized Transporter of Oil	or C	ondensate		Vomen (O)	e address to wi					
MERIDIAN OIL INC.	hard Car		Dry Gas	Address (Giv	ST_30TH e address to w	SIREEL,	opy of this fo	orm is to be se	nt)	
Name of Authorized Transporter of Casing EL PASO NATURAL GAS COI				P.O. BO	X_1492,	EL PASO,	_TX79			
If well produces oil or liquids,	Unit Sec.	Tw	p. Rge.	is gas actuali	y connected?	When '	1			
ive location of tanks.	1	l_		ing order pur	ber:					
this production is commingled with that I	rom any other lea	ase or puo	, give containing	ing other man						
		i Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		du to Der	<u></u>	Total Depth	<u> </u>	لـــــــــــــــــــــــــــــــــــــ	P.B.T.D.	l	_1	
Date Spudded	Date Compl. Re	cady to ric	м.							
Elevations (DF, RKB, RT, GR, etc.)	Top Oil/Gas Pay			Tubing Depth						
	<u> </u>			L			Depth Casii	ig Slice		
Perforations				_ 					·	
	TUBING, CASING AND			CEMENTING RECORD DEPTH SET			SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE			 	DEF IN DET			- OF # 42		
				THE PARTY OF THE P			HV C			
					THE WAY			1000		
V. TEST DATA AND REQUE	ST FOR ALI	LOWAI	LE		u	AUGS	13 Juan			
V. TEST DATA AND REQUE. OIL WELL (Test must be after	recovery of total	volume of	load oil and mu	s be equal to	or exceed top a Method (Flow,)	llowable for the	s deput or pe	Jor Jul 24 No	ws.j	
Date First New Oil Run To Tank	Date of Test			Producing 1	Alemon (1.10m.)	Cur .	ST. ?			
Length of Test	Tubing Pressu	re		Casing Pres	sure		Choke Size	•		
Lengar or Tes				Water - Bb	<u> </u>		Gas- MCF			
Actual Prod. During Test	Oil - Bbls.			water - Bu	Water - Doir					
GAS WELL							-rasi-si-z	Contends		
Actual Prod. Test - MCT/D	Length of Test			Bbls. Cond	Bbis. Condensate/MMCF			Gravity of Condensate		
	Tubing Pressure (Shut-in)			Casing Pre	Casing Pressure (Shut-in)		Choke Size			
Teating Method (pitot, back pr.)										
VI. OPERATOR CERTIFIC	CATE OF C	COMPL	IANCE		OIL CC	NSERV	'ATION	DIVISI	ON	
t hanks contifu that the rules and regulations of the Oil Conservation				II	Date Approved					
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Da				AUG 2 3 1990		
Nil Alexander					•	7	. \ .	d) ,		
Signature Chaff Admin Supervisor				Ву	By					
Signature W. Whaley, Staff Admin. Supervisor Printed Name				Til	ie	SUPI	RVISOR	DISTRIC	T #3	
July 5, 1990		303-8	30-4280 — Hone No.	. ^^						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.

SERVICE, INC. TEMPERATURE SURVEY COMPANY EL PARO NATURAL GAR COMPANY WELL DAYBEN # 1 FIELD COUNTY SAN JUAN STATE NEW MEXICO SEC. M - 28 TWP. 28 RGE 8 APPROX. TOP CEMENT......3840' Survey Begins at 3500! Ft. Ends at 4430! Approx. Fill-Up ______Max. Temp. ____158* Log Measured From G.L. Run No. Casing Depth Diam of Hole Casing Size Depth from _____ to ____ to ___ Date of Cementing July 17, 1965 Date of Survey July 17, 1965 Time 7:00 PM Amount of Cement 200 SACKS __ Туре... Amount of Admix.....Witnessed by Recorded by WILZEN REMARKS OR OTHER DATA JUL 22 1965 TEMPERATURE IN DEGREES FAHRENHEIT

B. & R.