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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	Well API No.
AMOCO PRODUCTION COMPANY	30-045-07439

Address: P.O. BOX 800, DENVER, COLORADO 80201

Reason(s) for Filing (Check proper box)

- New Well [ ]
- Recompletion [XX]
- Change in Operator [ ]
- Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]
- Other (Please explain) [ ]

If change of operator give name and address of previous operator _____

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
McCulley LS	4	Basin Fruitland Coal Gas	Fed.	NM-04208

Location: Unit Letter K : 1800' Feet From The S Line and 1650' Feet From The W Line

Section 14 Township 28N Range 9W NMPM, San Juan County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [ ] — Address (Give address to which approved copy of this form is to be sent)

Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [XXX] — Address (Give address to which approved copy of this form is to be sent)

El Paso Natural Gas — P.O. Box 4990, Farmington, NM 87499

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?

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
		XXX				XXX		

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
7/15/60	12/10/91	2210'	2504'
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
5958'	Fruitland Coal	2162'	2210'
Perforations			**Depth Casing Shoe**
2162' - 2267' Fruitland Coal			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	9 5/8"	328'	260 sx
	5 1/2"	6910'	295 sx
	2 3/8"	2210'	

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 Tank	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**

RECEIVED
JUN 16 1992
OIL CON. DIV.

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
102	24	-0-	-0-
Testing Method (pitot, back pr.)	**Tubing Pressure (Shut-in)**	**Casing Pressure (Shut-in)**	**Choke Size**
Flowing	300	300	64/64

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

Cindy Burton/fsn
Signature

Cynthia Burton, Staff Admin. Supervisor
Printed Name — Title

6/16/92 — 303-830-5119
Date — Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 08 1992

By Original Signed by FRANK T. CHAVEZ

Title SUPERVISOR DISTRICT #3

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 with Rule 111.

JUN 15 '92 10:15AM AMOCO PRODUCTION 1163