Submit 5 Copies
Appropriate District Office
DISTRICT 1
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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210	`		P.O. B ta Fe. New M	ox 2088 exico 8750	4-2088					
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		EST FO	R ALLOWAI	BLE AND A	AUTHOR					
I		TO TRAI	SPORT OIL	AND NA	TURAL G	AS	ADI Na			
erator Amoco Production Company							Well API No. 3004520454			
Address 1670 Broadway, P. O. Box 800, Denver, Colorado 80201							D004320434			
Reason(s) for Filing (Check proper box)		, beave	1, 0010140		r (Please exp	lain)				
New Well Recompletion	Oii		ransporter of:							
Change in Operator	Casinghead	i Gas 🔲 🤇	Condensate [
If change of operator give name and address of previous operator Tenr	neco Oi	LE&P	, 6162 S.	Willow,	Englewoo	d, Colo	rado 801	55		
II. DESCRIPTION OF WELL	AND LEA	SE								
Lease Name	I	Well No. Pool Name, Includir			· .			Lease No.		
FLORANCE C LS		14 B	LANCO SOUT	H (PICT CLIFFS) FED			EDERAL NMO		3549	
Location Unit LetterO	950)	Feet From The FS	L Lim	and 1700	F	eet From The _	EL	Line	
Section 19 Townshi	_p 28N	1	Range8W	Ni Ni	APM,	SAN	TUAN		County	
III. DESIGNATION OF TRAN	SPORTE	R OF OH	. AND NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Condens			e address to w	hich approve	d copy of this for	m is to be se	nt)	
Name of Authorized Transporter of Casing	_		or Dry Gas [X]	1			d copy of this for		nt)	
EL PASO NATURAL GAS CON		S	lwp. Rge.	P. O. BO		EL PASC Whe), TX 799	78		
If well produces oil or liquids, give location of tanks.	Unit	Soc.	iwp. Kgc. 	is gas actually	Connected?]	•			
If this production is commingled with that	from any oth	er lease or p	ool, give comming	ling order numl	жег:					
IV. COMPLETION DATA		los w.n	1 C. W.	1 N W-11	Washama	I Danner	Plug Back S	Come Des'y	Diff Res'v	
Designate Type of Completion	- (X)	Oil Well	Gas Well	I HEM MEII	Workover	Deepen	Plug Dack	anie Res v	pin kerv	
Date Spudded	Date Comp	l. Ready to l	rod.	Total Depth			P.B.T.D.		- 	
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	ine of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
Perforations	L			i			Depth Casing	Shoe		
f										
			CEMENTING RECORD							
HOLE SIZE	CAS	SING & TUE	SING SIZE	DEPTH SET			S/	SACKS CEMENT		
				ļ						
V. TEST DATA AND REQUES	T FOR A	HOWA	REF	l	····					
OIL WELL (Test must be after r				i be equal to or	exceed top al	lowable for th	is depth or be fo	r fuil 24 hou	vs.)	
Date First New Oil Run To Tank	Date of Tes	at		Producing Me	thod (Flow, p	ump, gas lýt,	etc.)			
Length of Test	Tubing Pre	Tubing Pressure			Casing Pressure			Choke Size		
ixing at the text	Tuoing Fie	J. R.J. C		Ĭ <u>.</u>	5					
ctual Prod. During Test. Oil - Bbls.				Water - Bbls.			Gas- MCF			
	1			1						
GAS WELL Actual Prod. Test - MCF/D	Length of Test			Bbls. Conden	Bbls. Condensate/MMCF			ondensate		
Actual Fied. Test - MCF/D	Longui Or Less			Bois. Condensatorium (
lesting Methisl (pitot, back pr.)	Tubing Pre	saure (Shul-i	n)	Casing Press	ire (Shut-in)		Choke Size			
VI. OPERATOR CERTIFIC	ATE OF	COMPI	JANCE							
I hereby certify that the rules and regul	ations of the	Oil Conserva	ition	(OIL CO	NSERV	'ATION E	NVISIC	N	
Division have been complied with and is true and complete to the best of my l			above	Date	Approve	ad i	AY 08 19	QQ		
a. L. Hham	Otan	,			Approve	~				
Supature			_	∥ By_		ميده	1 The	⊀		
J. L. Hampton Sr. Staff Admin. Suprv. Printed Name Title						Buperv 1	SION DIST	RICT	5	
Janaury 16, 1989		303-8	30-5025	Title						

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

Date

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

303-830-5025 Telephone No.

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.