District I PO Box 1980, Hobbs, NM 88241-1980 District II

811 South First, Artesia, NM 88210 District III

## OIL CONSERVATION DIVISION 2040 South Pacheco

/	Form C-104
	Revised October 18, 1994
	Instructions on back
Submit to	Appropriate District Office
	5 Copies

State of New Mexico Energy, Minerals & Natural Resources Department

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Instructions on back
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5 Copies

1000 Rio Brazo: District IV	s Rd.,	Aziec,	NM 87410		Sant	a Fe,	NM 87	7505			<b></b> 1		5 00		
2040 South Pac	beco, S												NDED REPO		
1.		RI	EQUES.	Γ FOR A	ALLOWAE	LE A	ND AI	JTHO:	RIZAT	TON TO T					
AMOCO PRODUCTION CO P. O. BOX 800										<sup>1</sup> OGRID Number 000778					
			DEN	/ER, CO	LORADO	8020	1			RC	Reason for	Filing (	Code		
*AP Number								<sup>5</sup> Pool Nume				* Pool Code			
30 - 0 45-24595 Blanco Mesaverde							Property Name				72319				
00051				Flora	ance D		Property Name				' Well Number 10R				
1. 10 5	Surfa	ice L	ocation		7								·		
Ul or lot no.	Sectio	'n	Township	Runge	Lot.Idu	Feet fre	om the North/South Line		Feet from the	East/Wes	t line	County			
В	17		27N	8W		980	North		1770	East	<u> </u>	San Juan			
UL or lot no.	Section		Township	Range	Lot Idn	Feet fr	om the North/South line		Feet from the	East/West line		County			
" Lee Code F	13 Pro	oducint	Method Co	ode '' Gan	Connection Date	15	C-129 Permit Number			* C-129 Effective	ective Dute C		9 Expiration Date		
I. Oil ar		as T	ranspor	ters											
"Transport OGRID				Transporter Name and Address			" PO	" POD " O/		22 POD ULSTR Location and Description		ilion			
9018		F.O.	. Box :	ning Co		Ö	<b>2</b> 347	34710 0							
007057				eld Ser		2	347	-31)	G						
			. Bek . Lington					~~~							
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7. Produ	ced	 Wate	 er			. I	············				MA	<u> </u>	7 1053		
יו מ	OD						<sup>11</sup> POD UL	STR Local	tion and De	escription	<b>O</b> III. (	( <del>प</del> िक्रा	W Taviras		
234	750	)									_	DIST	No DIV		
. Well C		letio		- L D											
3/2/8				cady Date		" TD		" PB		2 Perforations		" DHC, DC,MC			
	Hole !	Size	5/1		75: Casing & Tubing		7473		Depth Set	4946-544		DH			
12.25"			9.625"			264'			2		Sacks (	Cement			
8.75"				7.000"			3469'				250 sx 485 sx 635				
6.25"				4.500"			7525'			485 sx 635 485 sx 585					
					375" tubi	ng		737			55 SX		<u> </u>		
. Well T		Data													
			divery Date "Test Date 4/29/96			"Test Length 24 hrs		3º Thg. Pressure		44	Cag. Pressure				
" Choke Size 32/64			0 Oil		1	45 Water		440		" AOF		* Test Method			
hereby certify	informa	e rules	of the Oil Co	onservation Di true and comp	vision have been collete to the best of	omplied my			L CON	ISERVATIO	VIQ NC	/ISIO	F N		
nature:	Pat	ty	Ha	efele		<u></u>	Approved	by:		IGNED BY ERN					
PattyMaefele ,							DEPUTY OIL & GAS INSPECTOR, DIST. #3								
Staff Assistant							Approval Date: MAY 1 3 1996								
3/0/		<del> </del>		Phone: (30	3) 830-49	88									
Note:	nge of BLM	operati cal	orillinthe 1s this	OGRID num	berand name of by its Dal	the previous	ious operate	r f Flor	cance	63F					
			ator Signatu		, and but		Printed			· · · · · · · · · · · · · · · · · · ·	Title	<del></del> .	Date		
													17BIC		

## IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

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

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

- 1. Operator's name and address
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator (Include the effective date.)

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include volume requested)

If for any other reason write that reason in this box.

- 4. The API number of this well
- The name of the pool for this completion
- 6. The pool code for this pool
- The property code for this completion
- 8. The property name (well name) for this completion
- 9. The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- 11. The bottom hole location of this completion
- Lease code from the following table:
  F Federal
  S State
  P Fee
  J Jicarilla 12.

- NU
- Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table:
  F Flowing
  P Pumping or other artificial lift 13.
- MO/DA/YR that this completion was first connected to a gas transporter 14.
- The permit number from the District approved C-129 for this completion 15.
- MO/DA/YR of the C-129 approval for this completion 16.
- 17. MO/DA/YR of the expiration of C-129 approval for this
- 18 The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- Product code from the following table:
  O Oil
  G Gas 21.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.) 22.
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 23
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore. 30.

- Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and
- 34. Number of sacks of cement used per casing string

If the following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produced 35.
- 36. MO/DA/YR that gas was first produced into a pipeline
- 37 MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 41. Diameter of the choke used in the test
- 42. Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44. MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- The method used to test the well:

  F Flowing
  P Pumping
  S Swabbing
  If other method please write it in. 46.
- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report 47.
- The previous operator's name, the signature, printed name and title of the previous operator's representate authorized to verify that the previous operator no long operates this completion, and the date this report we signed by that person 48.