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 Samue En Manuelle 87504-2088 DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III		Sa	nta Fe	, New M	exico 8/30	14-2088					
1000 Řio Brazos Rd., Aziec, NM 87410 L	HEQU					AUTHORI TURAL GA	AS	_ , ,			
Operator AMOCO PRODUCTION COMPANY						Well API No. 300450722300					
Address P.O. BOX 800, DENVER,	COLORAD	0 8020	1								
Reason(s) for Filing (Check proper box)					Oth	er (Please expli	sin)				
New Well		Change in	-								
Recompletion	Oil	_	Dry Ga								
Change in Operator	Casinghea	d Gas	Conde	neate [_]							
f change of operator give name and address of previous operator											
I. DESCRIPTION OF WELL		Pool N	ame Include	ing Formation		Kind o	(Lease	Leas	Lease No.		
LACKEY B LS		14	BAS	IN DAK	TA (PRO	RATED GAS		Federal or Fee	<u> </u>		
Location A	7	90			FNL	. 99	90		FEL	Line	
Unit Letter	:28N	r	. Feet Fi	rom The 9W	110	e and		et From The JUAN		Line	
Section Townsh		· 	Range		,N	мрм,	SALI	JUAN		County	
III. DESIGNATION OF TRA	NSPORTE			D NATU	RAL GAS						
Name of Authorized Transporter of Oil or Condensate					Address (Give address to which approved copy of this form is to be sent)						
MERIDIAN OIL INC.					3535 EAST 30TH STREET, FARMINGTON, NM 87401 Address (Give address to which approved copy of this form is to be sent)						
Name of Authorized Transporter of Casi			or Dry	Cas []	1					,	
EL PASO NATURAL GAS C		C	l Thur	B.se	le gas actual		EL PASO Whea	TX 799	78		
If well produces oil or liquids, give location of tanks.	Մաս 	Soc.	Twp.	T v.Re:	is gas actual	y connected?	"""				
If this production is commingled with tha IV. COMPLETION DATA	t from any oth	er lease or	pool, gi	ve comming	ling order Burn	ber:					
Designate Type of Completion	n - (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v	
Date Spudded		pl. Ready to	Prod.		Total Depth	1	J	P.B.T.D.			
	Top Oil/Gas Pay			Tuhing Dorth							
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation								Tubing Depth			
Perforations								Depth Casing	Shoe		
		rubing,	CASI	NG AND	СЕМЕЙТІ	NONCOR	CEL	A & III			
HOLE SIZE	CA	CASING & TUBING SIZE				DBMASET			CKS CEMENT		
							11G2 3 1	2 3 1990			
	_					<u>H</u>	Jun -	507			
						OIL CON					
V. TEST DATA AND REQUI	EST DOD					Uii	DIST.	3			
V. TEST DATA AND REQUI OIL WELL — Test must be after	TALL FOR A	atal valume	of load	oil and mus	t he equal to o	exceed top all	owable for the	s depth or be fo	r full 24 hows	i.)	
Date First New Oil Run To Tank Date of Test					t be equal to or exceed top allowable for this depth or be for full 24 hows.) Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure				Casing Pressure			Chuke Size			
					Water - Bbls.			Gas- MCF			
Actual Prod. During Test	Oil - Bbis.				· ·						
GAS WELL											
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pr	Tubing Pressure (Shut in)				aure (Shut-in)		Choke Size			
realing (victores (pinos) seem p vy								1			
VI. OPERATOR CERTIFI	CATE OF	COM	PLIA	NCE	1		NCEDV	ATIONE	AIVISIO	M	
I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION						
Division have been complied with ar			ven abov	re			AI	JG 2 3 19 9	חנ		
is true and complete to the best of m	y knowledge i	MIG DELIÇI.			Dat	e Approve	ed		<u>,,, </u>		
DH. Mler	-				1		3.1)		/		
Signature Whaless Sta	ff Admi-	, Çı.n.	ruic	or	Ву				8		
Doug W. Whaley, Sta		. Jupe	Title	VI	Title	· 	- OF ERVIS	SOR DIST	RICT /3		
July 5, 1990		303-	830=	4280							

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