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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

Operator		Amoco Production Company	
Address		501 Airport Drive Farmington, NM 87401	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	☐	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☒

If change of ownership give name and address of previous owner

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II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
T. L. Rhodes "B" (200)	1	Basin Dakota	State, Federal or Fee Federal	NY08084
Location				
Unit Letter	0	839	Feet From The South	Line and 2013
Line of Section	20	Township	28-N	Range 11-W
			NMPM,	San Juan

III. 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)	
Gary Energy Corp.	P. O. Box 489 Bloomfield, NM 87413	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	Box 990, Farmington, New Mexico	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	0	20
	28N	11W
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't.	Diff. Re
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
4-16-66	7-21-66		6248'		6211'			
Elevation (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
5686' (RKB)	Dakota		6007'		6070'			
Perforations					Depth Casing Shoe			
6113-42', 6061-72'					6248'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		359'		200			
7-7/8"	4-1/2"		6248'		1100			
	2-3/8"		6070'					

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 oil able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	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

GAS WELL

Actual Prod. Test MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2270	3 hrs.		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
back pressure	1952	1954	3/4"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature BDS Shaw
Admin. Supervisor
11-1-84
Date

OIL CONSERVATION COMMISSION
APPROVED Frank J. Shaw, 19 NOV 26 1984

BY Frank J. Shaw
TITLE Supervisor District # 3

This form is to be filed in compliance with NMB 1100.
If this is a request for allowable for a newly drilled or reworked well, this form must be accompanied by a statement of the tests taken on the well in accordance with NMB 111.
All sections of this form must be filled out completely for oil or gas on new and recompleted wells.
Fill out only Sections I, II, III, and IV for changes of oil well name or number, or transportation or other such change of data.
Separate Forms C-104 must be filed for each pool in newly completed wells.