Appropriate County Office DISTRICT I P.O. Day 1980, Hubbs, NM 88240

Energy, Minerals and Natural Resources Department

Form C-101 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

I.	REQUEST FOR A	ALLOWALLORE C	ABLE AND AUTHOR OIL AND NATURAL C	RIZATION	ı			
Operator Pond	Amaco Production Co				Well API No.			
Vodiess								
Keason(a) for running (Check proper bo)	h Street, For	rwipi	Other (Please exp	874 C	21	- 	~~~	
New Well	Change in Transp			•				
Change in Operator If change of operator give name	Casinghead Gas Conde							
and address of previous operator	-							
II. DESCRIPTION OF WELL Lease Name	Well No. Pool N	Vame, Inclu	dine Formation	V:		·	. !	
Location Canyon	Unit 1237F B	asin_(Dakota		of Lease Federal or Fee	ľ	Lease No. D 8807A	
Unit Letter C				50 r		(.)		
Section 13 Towns			3 W NMPM		cet From The	<u>.u.</u> _	Line	
III. DESIGNATION OF TRA				San	Juan		County	
traine of Audionzed Transponer of Off	or Condensate	⊠ MIVIT	Addiess (Give address to wi	hich approved	copy of this for	n is to be si	ent)	
Meridian Dilli Name of Authorized Transporter of Casi	Addicss (Give achivers to which approved copy of this form is to be sent)							
EL Pase Natural If well produces oil or liquids,	Gas Co Unit Sec. Twp.	Rge.	Caller Service	4990, 5	cminator	N 14 10 De ve	en!)	
give location of tanks.	1 C 1 13 12011	ha w	and an image of the control of the c	When	7			
If this production is commingled with the IV.—COMPLETION DATA	t from any other lease or pool, give	e conmingl	ling order number:					
Designate Type of Completion - (X) Oil Well Gas Well			New Well Workover	Deepen	Plug Back Sa	inc Res'v	Diff Res'v	
Date Spridded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
	TUBING CASIN	IG AND	CEMENTING RECORT					
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
					,			
Trernie Annagus								
A. TEST DATA AND REQUE: OIL WELL (Test must be after to	5 FOR ALLOWABLE recovery of total volume of load of	Tand mista	handuside ameximal monthly	و زراد کام	depth or be for fi			
Pate First New Oil Run To Tank	recovery of total volume of load oil Date of Test			E 841	c.)	ui 24 hours	.)	
ength of Test	Tubing Pressure		Casing APRI 7 1989		Choke Size			
ctual Prod. During Test	Oil - libis.		WOIL CON. DI	Δ	Gas- MCF			
GAS WELL	1		DIST. 3					
ictual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF		Gravity of Condo	neate		
esting Method (pitot, back pr.)	Tubing Pressure (Shut in)		Casing Pressure (Shut-in)		Choke Size		· '	
I. OPERATOR CERTIFIC	ATE OF COMPLIANCE	712		الوائمديد.	rear in the rear age of	-		
I hereby certify that the rules and regula	ations of the Oil Conservation	-1:	OIL CONS	SERVA	TION DIV	VISIO	N	
Division have been complied with and is true and complete to the best of my k	hat the information given above nowledge and belief.		Date Approved					
1200 haw			Date ApprovedAPR 17 1989					
Signature B.D. Shaw Adm. Supr			By	٨) (In Sunt	- <u> </u>		
B. D. Shaw Adm. Supx. Printed Number 17 1919 (505) 325-8841			Titlesupervision district # 3					
Date	Telephone No.							

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
- 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 manned to number, temperature and the section of th