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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator AMOCO PRODUCTION COMPANY		Well API No. 30-045-26148
Address P.O. BOX 800, DENVER, COLORADO 80201		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name VANDEWART B	Well No. #3	Pool Name, including Formation BLANCO PICTURED CLIFFS	Kind of Lease FED.	Lease No. SF-078502
Location Unit Letter N : 870 Feet From The SOUTH Line and 1600 Feet From The WEST Line Section 11 Township 29N Range 8W, NMPM, SAN JUAN County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
EL PASO NATURAL GAS	P.O. BOX 4990, FARMINGTON, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	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'v	Dif Res'v
		XXX				XXX		
Date Spudded 3/3/85	Date Compl. Ready to Prod. 7/6/92		Total Depth 7550' KB			P.B.T.D. 3395'		
Elevations (DF, RKB, RT, GR, etc.) 6325' KB	Name of Producing Formation PICTURED CLIFFS		Top Oil/Gas Pay 3042'			Tubing Depth 2949'		
Casinghead Gas 3042' - 3090' PICTURED CLIFFS						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8"	303' KB	250 sx 295 CF B + 2% CaCl ₂ + 1/4# sx floccle.
8 3/4"	7 "	3615' KB	325 sx 731 CF B - 2% CaCl ₂ , floamed to 8.0ppg
	2 3/8"	2949'	

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 allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	DECISION JUL 23 1992 OIL CON. DIV. DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Dbls.	Water - Dbls.	

GAS WELL

Actual Prod. Test - MCF/D 304	Length of Test 24 hours	Dbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pilot, back pr.) Flowing	Tubing Pressure (Shut-in) 303	Casing Pressure (Shut-in) 310	Choke Size .5

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Cindy Burton /pls
Signature
Cynthia Burton, Staff Admin. Supervisor
Printed Name
7-17-92
Date
303-830-5119
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 18 1992

By

Title DEPUTY CHIEF OF BUREAU

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