

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

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

RECEIVED
FEB 28 1977
FARMINGTON AREA
AS
AAS
WRC
5-MFT 7M37

I. OPERATOR

Operator AMOCO PRODUCTION COMPANY

Address 501 Airport Drive, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Oil ☐ Dry Gas ☐

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☒

Other (Please explain) WRC

If change of ownership give name and address of previous owner W.F.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Chavez Gas Com "A" Well No. 1A Pool Name, Including Formation Blanco Mesaverde Kind of Lease Federal Lease State, Federal or Fee SF 07633

Location

Unit Letter P : 800 Feet From The South Line and 795 Feet From The East

Line of Section 3 Township 29N Range 9W , NMPM, San Juan Co.

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 P. O. Box 990, Farmington, New Mexico 87401

If well produces oil or liquids, give location of tanks. Unit P Sec. 3 Twp. 29N Rge. 9W 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.	Diff. R
		☒	☒					
Date Spudded <u>1-7-77</u>	Date Compl. Ready to Prod. <u>1-26-77</u>	Total Depth <u>5504'</u>	P.B.T.D. <u>5454'</u>					
Elevations (DF, RKB, etc.) <u>6357' Gr., 6370'</u>	Name of Producing Formation <u>Mesaverde</u>	Top Oil/Gas Pay <u>4609'</u>	Tubing Depth <u>5359'</u>					
Perforations <u>4609-33, 4648-54, 4668-77, 4681-93, 4706-08, 4712-16, 4731-76, 4828-36, 4876-80, 4900-04, 4916-22, 4932-40, 4964-72, 5008-20, 5102-06, 5126-38, 5154-56, 5160-66, 5328-34, HOLE SIZE 5354-59.</u>	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	<u>12-1/4"</u>	<u>9-5/8"</u>	<u>263'</u>					
	<u>8-3/4"</u>	<u>7"</u>	<u>3375'</u>					
	<u>6-1/4"</u>	<u>4-1/2"</u>	<u>3175-5500'</u>					
		<u>2-3/8"</u>	<u>5359'</u>					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks 1-7-77 Date of Test 1-26-77 Producing Method (Flow, pump, gas lift, etc.) Flow

Length of Test 3 hr. Tubing Pressure 500 Casing Pressure 530 Choke Size .75

Actual Prod. During Test 1833 Oil - Bbls. 3 Water - Bbls. 0 Gas - MCF 0

GAS WELL

Actual Prod. Test - MCF/D 1833 Length of Test 3 hr. Bbls. Condensate/MCF 0 Gravity of Condensate 50

Testing Method (pilot, back pr.) Back Pressure Tubing Pressure (Shut-in) 500 Casing Pressure (Shut-in) 530 Choke Size .75

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.

OIL CONSERVATION COMMISSION
APPROVED Frank Shaw 1984, 19
BY Frank Shaw
SUPERVISOR DISTRICT # 3

TITLE

This form is to be filed in compliance with NMB 1100.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with NMB 111.
All sections of this form must be filled out completely for it to be on new and recompleting wells.
Fill out only Sections I, II, III, and IV for changes of gas well name or number, or transportation, or other such change of gas well. Name of the well to be filed for test well is will

Signature

Admin. Supervisor

11-1-84
Date