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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-110
Effective 1-1-65

Operator AMOCO PRODUCTION COMPANY	
Address 501 AIRPORT DRIVE, FARMINGTON, NEW MEXICO 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name A. L. Elliott "A"	Well No. 3	Pool Name, including Formation Blanco Pictured Cliffs	Kind of Lease State, Federal or Fee Federal	Lease No. SF078132
Location Unit Letter A : 1165 Feet From The North Line and 1120 Feet From The East Line of Section 11 Township 29-N Range 9-W , 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 Company	P. O. Box 990, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 11	Twp. 29-N	Rge. 9-W	Is gas actually connected? No	When Approximately 60 days

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. Res'v.
			X	X					
Date Spudded April 10, 1978	Date Compl. Ready to Prod. May 5, 1978	Total Depth 3160'		P.B.T.D. 3115'					
Elevations (DF, RKB, RT, CR, etc.) 6324' GL	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 2946		Tubing Depth 3066'					
Perforations 2946'-76', 3052'-58' with 1 SPF, size .4				Depth Casing Shoe 3159'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8"		271'		260 sx				
7-7/8"	4-1/2"		3159'		725 sx				

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)

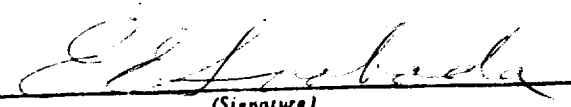
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL


Actual Prod. Test-MCF/D 1224	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back pressure	Tubing Pressure (shut-in) 626	Casing Pressure (shut-in) 626	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.


(Signature)
Area Administrative Supervisor
(Title)
May 16, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED  , 19
BY Original Signed by A. B. Kondrinski
SUPERVISOR DIST. 43
TITLE

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.