Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

<u>ISTRICT III</u> OW Rio Brazos Rd., Aziec, NM 87410	REQUEST F	•		LE AND AU		ZATION			
TO TRANSPORT OIL AND NATURAL GA									
AMOCO PRODUCTION COMPANY						300450927900			
Address P.O. BOX 800, DENVER, O	COLORADO 8020	01							
Reason(s) for Filing (Check proper box)		T		Other (P	lease expla	iin)			
New Well	Change in	Dry Ga							
Recompletion L		Conden	_						
change of operator give name nd address of previous operator									
I. DESCRIPTION OF WELL	AND LEASE								
ARCHULETA	Well No.	Pool Na BLA!	ame, Includia NCO MES	AVERDE (PR	ORATED	Kind of		Lea	se No.
Location N	1000	East En	om The	FSL Line and		80 Fee	at From The	FWL	Line
Unit Letter	30N	Range	8W	NMPM		SAN	JUAN		County
		MI AN	D NATIII	DAT CAS					
II. DESIGNATION OF TRANS Name of Authorized Transporter of Oil	or Coude	nsale	L	Address (Give ad	dress to wh	ich approved	copy of this for	n is to be sent)
MERIDIAN OIL INC.				3535 EAST 30TH STREET, FARMINGTON, NM. Address (Give address to which approved copy of this form is to be sent,					
Name of Authorized Transporter of Casing		or Dry	Cas [P.O. BOX					'
SUNTERRA GAS GATHERING If well produces oil or liquids, tive location of tanks.	Unit Sec.	Twp.	Rge.	is gas actually co		Whea		0,423	
f this production is commingled with that f	rom any other lease of	_l r pool, giv	e comming)	ing order number:					
V. COMPLETION DATA						· · · · · ·	mus number	Park	Diff Res'v
Designate Type of Completion	[Oil Wei - (X)	n (Gas Well	New Well W	orkover	Deepen	Plug Back S	ame Kes v	DIII KEEV
Date Spudded	Date Compl. Ready I	to Prod.		Total Depth		·	P.B.T.D.		
Elevations (DF, RKB, RF, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
evauons (DF, RKB, RT, OR, etc.)						Depth Casing Slice			
Perforations							Depail Casing	3400	
	TUBING	, CASI	NG AND	CEMENTING	RECOR	D		NF 12 17	3-
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET . D			E PAGE EMPH		
						— <i>IU</i>		<u>-</u>	<u> </u>
							UG2 3 1		
	TEOD ALLON	ADIE				Ol	CON.	-DIV	
V. TEST DATA AND REQUES OIL WELL (Test must be after to	be equal to or exc	eed top all	owable for this	dep DIST for	Bull 24 hour.	s.)			
Date First New Oil Run To Tank	Producing Metho	d (Flow, p	ump, gas lift, e	ic.)					
Length of Test	Tubing Pressure			Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas- MCF		
	<u></u>			1			J		
CAS WELL ctual Frod. Test - MCF/D Length of Test				Bbis. Condensate	MMCF		Gravity of Condensate		
	Tubing Pressure (Shuu-in)			Casing Pressure (Shut-in)			Choke Size		
Testing Method (pilot, back pr.)	Tuoring Treasure (on	<u> </u>							
VI. OPERATOR CERTIFIC	ATE OF COM	PLIA	NCE	01	L CO	NSERV.	ATION E	OIVISIO	N
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				AUG 2 3 1990					
is true and complete to the best of my knowledge and belief.				Date Approved					
D. H. Skley				By 3.12 chang					
Signature Doug W. Whaley Staff Admin. Supervisor Title				SUPERVISOR DISTRICT #3					
Printed Name	303	=830=4 clephone	4 <u>2</u> 80	Title_					
Date		- Intrase	. ~.	11					

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.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.