

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator

Amoco Production Company

Address

501 Airport Drive, Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well

☒

Change in Transporter of:

Recompletion

☐

Oil

☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

RECEIVED

JUN 17 1983

OIL CON. DIV.

C-104

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lessee Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Romero Gas Com "A"	1	Armenta Gallup	State, Federal or Fee Fee	
Location				
Unit Letter	K	1850 Feet From The south Line and 1850 Feet From The west		
Line of Section	27	Township 29N Range 10W	NMPM, San Juan	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company PLA	P. O. Box 990, Farmington, NM 87401					
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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	27	29N	10W	No	

If this production is commingled with that from any other lease or pool, give commingling order number:

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		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
12-6-82	2-17-83	5750'	5693					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
5496' GL	Gallup	5316'	5665'					
Perforations	Depth Casing Shoe							
5316'-5496', 5516'-5652' with 2 JSPF for 632 .38" holes.					5675'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8" 54.5# J-55	295'	619
12-1/4"	9-5/8" 47# S-95	3440'	1023
8-1/2"	7" liner	3228-5270'	400
	4-1/2" liner	5040-5675'	190
	2-3/8"	5665'	

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.)	
5-11-83	5-12-83	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
18 hrs.	65		32/64
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	16.7	0	63.4

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

Original Signed By
D.D. Johnson

(Signature)

District Administrative Supervisor

(Title)

June 15, 1983

(Date)

OIL CONSERVATION DIVISION

APPROVED

JUN 17 1983

BY

Original Signed by FRANK T. CHAVEZ

TITLE

SUPERVISOR DISTRICT # 3

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.