## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

Pd. 00 (07)28 011	4104.0	T	
DISTRIBUTI			
BANTA FE			
PILE			
U.S.G.A.			
LAND OFFICE			
TAAHSPORTER			
	GAS		
OPERATOR			
PROBATION OFF	KE		

## OIL CONSERVATION DIVISION P. O. BOX:2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

RECUEST FOR ALLOWARIE



Separate Forms C-104 must be filed for each pool in multi; completed wells.

OPERATOR	AND	CLUMABLE		
AUTHORIZATION	· · · · <del>-</del>	T OIL AND NATU	RAL GASEP 1 9 1985	
1.		· · · · · · · · · · · · · · · · · · ·		
Operator Nouthwest Dinaline Composition	•		OIL CON. DI	<b>V.</b>
Northwest Pipeline Corporation	· · · · · · · · · · · · · · · · · · ·		DIST 3	<u> </u>
P.O. Box 90 - Farmington, New Mexi	co 87499		Dio	
Reeson(s) for tiling (Check proper box)		Other (Please	explain)	<del></del>
New Well Change in Transpor	rter of:	1	ge of Operator	40.
Recompletion OII	Dry Go	1		
Change in Ownership Casinghead Go	Conde	nsale		
If change of ownership give name Amoco Dwoductio		4.	F	07401
and address of previous owner Amoco Productio	n Co 501	Airport Dr	· Farmington, NM	87401
TO DESCRIPTION OF WELL AND LEAST				
II. DESCRIPTION OF WELL AND LEASE    Well No.   Pool Name   Well No.   Pool Name   Pool Na	ne, including Forma	tion	Kind of Lease	Legse N
Rosa Unit 116 Undes	ignated Gall	up	Χημή, Federal αγχέλου χ	SF07876
Location				
Unit Letter A : 1050 Feet From The	North Line an	790	_ Feet From TheEast	·
Line of Section 24 Township 31N	Range	6W NMPM.	Rio Arriba	Count
III. DESIGNATION OF TRANSPORTER OF OIL ANI			1 1/11	<del></del>
Name of Authorized Transporter of OII or Condensate		diess to the address t	o which approved copy of this	form is to be sent;
Name of Authorized Transporter of Casinghead Gas (A) or Dr	y Gas Ad	dress (Give address t	o which approved copy of this	form is to be sent!
Northwest Pipeline Corporation		· ·		7499
If well produces oil or liquids, Unit , Sec. Two	p. Rge. Is	gas actually connecte	d? When	
give location of tanks.		No	1	-
If this production is commingled with that from any other le	ease or pool, give	commingling order	number:	
NOTE: Complete Parts IV and V on reverse side if ne	cessary.			
VI. CERTIFICATE OF COMPLIANCE	11	OIL CO	DNSERVATION DIVISION	ON
				· 8 19 <b>86</b>
I hereby certify that the rules and regulations of the Oil Conservation been complied with and that the information given is true and complet		PPROVED	<u> JAN</u>	0 1500
my knowledge and belief.	- 11	YOrig	incl Signed by FRANK T. C	HAVEZ
			OLOTRICT TI	
$\alpha$	Т	ITLE	SUPERVISOR DISTRICT	<del></del>
(Marie Ha	7	This form is to	be filed in compliance wit	h RULE 1104.
Carrie Harmon			est for allowable for a new	
Production & Drilling Clerk			be accompanied by a tabu well in accordance with Mu	
9-11-85		All sections of to	this form must be filled out ompleted wells.	completely for allo
(Date)		Fill out only Seell name or number.	octions I. II. III. and VI i	for changes of own h change of conditi

Designate Type of Comple		OII MeII	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v. DILL P	
Date Spudded	Date Compl	Date Compl. Ready to Prod.		Total Depti	<u> </u>	<u>i                                     </u>		<u> </u>	
7-24-84	9-1	19-84		1	-		P.B.T.D.		
Elevations (DF, RKB, RT, GR, ste.,		Name of Producing Formation Undesignated Gallup		8080 '   Top Oil/Gas Pay   6766 '			8035'		
6293' KB	Unc						Tubing Depth		
Perforations	-	· · · · · · · · · · · · · · · · · · ·		070	<u> </u>	<del></del>	Depth Casts	na Char	
6766'-7266'							1		
		TUBING,	CASING, AND	CEMENTI	NG RECOPE	·	I Packer	set at 7297'	
HOLE SIZE	CASIN	NG & TUBIA	NG SIZE		DEPTH SE				
15"	1 11-	3/4"			4021	·		CKS CEMENT	
7-7/8"	4-	1/2"			8080'		2535 c	u.ft.	
. TEST DATA AND REQUEST	FOR ALLO	WABLE (T	est must be aft	er recovery o	of total volum	of load oil	-		
TEST DATA AND REQUEST OIL WELL Odie First New Cil Run To Tanks	FOR ALLO		est must be afi ble for this dep		of socal volum full 24 hows) school (Flow,		and must be ec		
V. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks -ength of Test			est must be afi ble for this dep		ethod (Flow,		and must be ec		
Odie First New Oli Run To Tanks	Date of Tees		ess must be afi ble for this dep	Producing M	ethod (Flow,		and must be ec		
ength of Yest  Grant Prod. During Test	Date of Test	ews.	est must be afi ble for this dep	Producing M	ethod (Flow,		and must be es		
ength of Test  studi Prod. During Test  AS WELL  ctual Prod. Test-MCF/D	Tubing Press Oil-Bbls.	ewe		Producing M Casing Pres Water-Bbis.	eure		Choke Sixe	ual to or exceed top	
ength of Test  attual Prod. During Test  AS WELL  ctual Prod. Test-MCF/D  AOF=3030 Q=2789 MCF/D	Tubing Presi	ewo		Producing M	eure		and must be es	ual to or exceed top	
Odie First New Oll Run To Tanks	Date of Test Tubing Press Oil-Bbis.	et rs.		Producing M Casing Pres Water-Bbis. Bbis. Candel	eure	pump, gas li	Choke Sixe	ual to or exceed top	

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

DISTAIBUT	0#	$\neg$	_
BANTA FE			
FILE		$\neg$	
U.8.G.A.			
LAND OFFICE		$\neg$	
TRANSPORTER	OIL		_
	GAS		_
OPERATOR		$\neg$	
PROBATION OFF	HCE	$\Box$	

Form C-104 Revised 10-01-78 Format 06-01-83

SANTA CE		OIL CONSER	RVATION DIVIS	SION P	age 1
FILE		P. C	. BOX:2088		
U.8.0.8.		SANTA FE,	NEW MEXICO 875	01/8	
LAND OFFICE					
TRANSPORTER OIL					
OPERATOR GAS		REQUEST	FOR ALLOWABLE		Cha
PROBATION OFFICE			AND	SFD.	
T	AUTHO	DRIZATION TO TR	AND ANSPORT OIL AND NA	WHURAL GAS 9 100.	$\mathcal{A}$
Cpercior		<del></del>		1385	<u> </u>
Northwest Pipel	ine Corporat	ion		DIST. DIV	
P.O. Box 90 - Fa	armington,	New Mexico	87499	. 3	
Resson(s) for siling (Check propi				lease expiain)	
New Well		in Transporter of:	1	•	
Recompletion			Dry Gas	ange of Operator	
Change in Ownership	=	تخ	<b>≒</b>		
Crance in Course		singhead Gas	Condensate		
If change of ownership give na and address of previous owner	Amoco Pr	oduction Co.	- 501 Airport Dr	Farmington, NM	87401
II. DESCRIPTION OF WELL	AND LEASE				
Lease Name		o. Pool Name, Includ	ing Formation	Kind of Lease	Legae
Rosa Unit	116	Baskin Da	kota	Lique, Federal wix Fee	SF0787
Location	<del> </del>				31 07 07
Unit Letter A	1050 Feet F	The North	_Line and <u>790</u>	Feet From The	ast
Line of Section 24	Township	31N Range	6W \ N	мрм. Rio Arriba	Cou
				, ATO MITIDA	
III. DESIGNATION OF TRA	NSPORTER OF	TEN OUR TIO	TRAL GAS		
Name of Authorized Transporter		Condensate		ess to which approved copy of this	form is to be sent!
	_				,,
Name of Authorized Transporter	of Castoobead Gas	A or Dry Gas	Address (Give adds	ess to which approved copy of this	(a.=
Northwest Pipeli			ı		
Not clives C 1 (per)		<del></del>		90 - Farmington, NM	87499
If well produces oil or liquids,	Unit	c. Twp. Rge	Is gas actually con	nected? When	
give location of tanks.			No		· .
If this production is commingle	d with that from	any other lease or r	ool, give commingling o	order number:	
					·
NOTE: Complete Parts IV	and V on reverse	side if necessary.			
				0010551455	
VI. CERTIFICATE OF COM	PLIANCE			CONSERVATION DIVISI	ON
I hasabu samifu shan sha salar and a	-1-1	C		\$ 25 <b>2.</b>	5 45 <b>6</b> C
I hereby certify that the rules and re been complied with and that the info				- JAN -	<u>→ 1300 — </u>
my knowledge and belief.	5. ven 13 mae	and complete to the oc	BY	Original Classed by FRAMK T. Ch	1A1/E7
			"	7	
			TITLE	SUPERVISOR DIS	STRICT ## 8
$\Lambda$			_		
(101110 X/0	ime.		This form i	s to be filed in compliance wit	th RULE 1104.
	Signature		If this is a	request for allowable for a new	vly drilled or deep
Production & Dr	illing Clerk	(	tests taken on t	nust be accompanied by a tabu he well in accordance with Rt	Hation of the devis
	(Title)	·	II	of this form must be filled ou	
9-11-85	( , ,,,,,,		able on new and		. combinerary for at

Fill out only Sections I. II. III, and VI for changes of own well name or number, or transporter, or other such change of conditi Separate Forms C-104 must be filed for each pool in multi-completed wells.

2" X .750"

IV. COMPLETION DATA										
Designate Type of Completi	on - (X)	Oll Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resty.	Ditt. Re	
Date Spudded			, X	X	!	į		;	1	
7-24-84	Date Compl. Ready to Prod.		rod.	Total Depin			P.B.T.D.			
	9-19-84			808	0'		8035'			
Elevations (DF. RKB, RT, GR, etc.) 6293' KB				Top Oll/Gas Pay			Tubing Cepth			
Perforations	Basin Dakota •			7832'			7990'			
	832'-7988'						Depth Costs	ng Shoe		
7032 -7300							8080'			
	· ·	TUBING, C	ASING, AN	D CEMENTI	NG RECORD	)		<del></del>		
HOLE SIZE	CASI	NG & TUBIN	G SIZE	1	DEPTH SE			CKE CENE		
15"	<u> </u>	11-3/	′4"	402'		·	SACKS CEMENT			
7-7/8"	4-1/2"			8080'			413 cu.ft.			
		2-3/8"		7990'			2535 cu.ft.			
I THE TO A MANAGE TO A STATE OF THE STATE OF	<u> </u>			<u> </u>					·	
7. TEST DATA AND REQUEST OIL WELL	FOR ALLO	WABLE (T	est must be a	fler recovery o pth or be for f	f total volum	of load oil	and must be eq	ual to or exce	ed top al	
Date First New Oil Run To Tanks	Date of Tee				ethod (Flow,				· · · · · · · · · · · · · · · · · · ·	
Langth of Test	Tubing Pres	· · · · · · · · · · · · · · · · · · ·								
- 1 1	I mornd bles	•W•		Casing Pres	eme .		Choke Size	<del>-                                    </del>		
Actual Prod. During Test	Oil-Bhis.	Oil-Bbis.		Water - Bbis.		Gae-MCF				
							GCIPMC			
AS WELL	N.,.			•	<del></del>					
Actual Prod. Test-MCF/D	Length of Te	et		Bble Conde			·			
OF = 1599 Q=1593 MCF/D	3 h	rc .		Bbis. Conder	HERTO/MMCF		Cravity of Co	ndensate	:	
	Tubing Press	we (Shut-Li	<del>.,</del>	Castan Sc						
Back Pressure	224		-,	Casing Press	me ( Epac-Ti	<b>a</b> )	Choke Size			
		J					2" X	75በ"		