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SANTA FE		/	
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บ. ร. G. ร .			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	Ī
OPERATOR		1	
PRORATION OFFICE			
Operator			

1	SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (GAS		
	TRANSPORTER OIL					
	OPERATOR /					
1.	PRORATION OFFICE Operator					
	AMOCO PRODUCTION COMPANY					
	501 Airport Drive, Farmington, New Mexico 87401					
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New Well Recompletion	Change in Transporter of: Oil Dry Gar	s 🔲			
	Change in Ownership	Casinghead Gas Conden	sate			
	If change of ownership give name and address of previous owner					
11	DESCRIPTION OF WELL AND	I FASE				
11.	Lease Name	Well No. Pool Name, Including Fo	Carta Fadara			
	Elliott Gas Com "U"	1 Blanco Picture	ed Cliffs	or Fee Federal SF 078139		
	Unit Letter N ; 80	00 Feet From The South Lin	e and 1490 Feet From	The West		
	Line of Section 33 Tov	vnship 30N Range	9W , NMPM, San	Juan County		
111	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	.S			
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro-	ved copy of this form is to be sent)		
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas 🛣	Address (Give address to which appro-			
	El Paso Natural Gas Con	npany Unit Sec. Twp. Rge.	Box 990, Farmington, No. 1s gas actually connected?			
	If well produces oil or liquids, give location of tanks.		No			
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,		T		
	Designate Type of Completion	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	12-2-72 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	2450 Top Oil/Gas Pay	2391 Tubing Depth		
	5678' Gr., 5692' KB	Pictured Cliffs	2301'	2340¹ Depth Casing Shoe		
	2305-2347' w/1 SPF 2438'					
	TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT					
	12-1/4"	8-5/8"	227'	200 ax		
	7-7/8"	4-1/2"	2438'	750 sx		
		1.66" OD	2340'			
v.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-		
	OII. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Langin of Tast		Water - Bbls.	Gas-MCF		
	Actual Prod. During Test	Oil-Bols.	wdter - Bbis.	JAN 12 1973		
				OIL CON. COM.		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Cond PIST. 3		
	606	3 hrs. Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.) Back Pressure	603	604	.750		
VI.	CERTIFICATE OF COMPLIAN	CE		ATION COMMISSION		
	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.		APPROVED JAN 1 2 1973 . 19			
			TITLESUPERVISOR DIST. #3			
	Origina: Signed by J. ARMOLD SWELL (Signature)		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.			
	Area Enginee	<u>r</u>	All sections of this form my	ist be filled out completely for allow-		
	January 10,	tle) 1973	able on new and recompleted wells.			
		ite)	well name or number, or transpor	ter, or other such change of condition.		