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

(Title)
March 25, 1976

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

	FILE		AND	Effective 1-1-65		
	U.S.G.S.	_ AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	CAS		
	LAND OFFICE		THE STATE AND WATORAL	0.0		
	TRANSPORTER OIL					
	GAS					
	OPERATOR					
I.	PRORATION OFFICE					
	Operator AMOCO PROPILEMENTON	AMOCO PRODUCTION COMPANY				
	/ KILLIV - ~ \					
	Address			11.55		
	501 Airport Driv	e, Farmington, New Mexico	o 87401	MAR 26 1976		
	Reason(s) for filing (Check proper box	x)	Other (Please explain)	MAK 20 IO.		
	New Well	Change in Transporter of:		OIL CON. COM.		
	Recompletion	Oll Dry Go	is .	OIL COM. 3		
	Change in Ownership	Casinghead Gas Conder	ns ate	DIST 3		
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AND					
	Lease Name	Well No. Pool Name, Including F				
	Van Hook Federal	1 Blanco Picti	ared Cliffs State, Feder	al or Fee Federal SF 080424		
	Location					
	Unit Letter	30 Feet From The South Lin	ne and 875 Feet From	The West		
	67	00 11	4.4 **			
	Line of Section 27 To	ownship 32-N Range	11-W , NMPM,	San Juan County		
III.		TER OF OIL AND NATURAL GA				
	Name of Authorized Transporter of Oi	or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)		
	Name of Authorized Transporter of Ca		Address (Give address to which appr			
	El Paso Natural Gas Co		P. O. Box 990, Farmin			
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.		hen		
	give location of tanks.	1 1 1	No			
	If this production is commingled w	ith that from any other lease or pool,	give commingling order number:			
	COMPLETION DATA					
	Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.		
	,,	48	X			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	<b>5-</b> 2-75	7-1-75	3100'	3040*		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	6192' KB	Pictured Cliffs	2900*	2992'		
	Perforations			Depth Casing Shoe		
	2950-76' x 2900-22 x 2 SPF 3086'					
		TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	12-1/4"	8-5/8"	197	175		
	6-3/4"	4-1/2"	3086	750		
		2-3/8"	2992*			
			J			
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	l and must be equal to or exceed top allow-		
	OIL WELL Date First New Oil Run To Tanks		pth or be for full 24 hours)  Producing Method (Flow, pump, gas l	(4 asa)		
	Date First New Oil Hun To Tanks	Date of Test	Producing Method (Ptow, pump, gos	iji, etc.)		
	the same of many	Tubing Deserved	Casing Pressure	Choke Size		
	Length of Test	Tubing Pressure	Cdaing Pleasure	0.020 0.20		
	And David Break	Oil-Bbls.	Water - Bbls.	Ggs-MCF		
	Actual Prod. During Test	Ott - Bhis.	Wd(81 - 2316)			
		1				
	GAS WELL		T D) ( - 0.000	V Granden of Granden or the		
	Actual Prod. Test-MCF/D  1496	Length of Test  3 hr.	Bbls. Condensate/MMCF	Gravity of Condensate		
}			Coning Descript (Short-19)	Choke Size		
Į	Testing Method (pitot, back pr.)  Back Pressure	Tubing Pressure (Shut-in) 777	Casing Pressure (Shut-in) 780	3/4"		
į	water videofic		1	<del></del>		
VI. CERTIFICATE OF COMPLIANCE		CE	OIL CONSERV	ATION COMMISSION		
	I hereby certify that the rules and regulations of the Oil Conservation					
	nmission have been complied with and that the information given ve is true and complete to the best of my knowledge and belief.		BY OMENAL SIGNED BY N. E. MAXWELL, JR.			
				rahasai DioY. <b>2</b> 0 0		
			TITLE			
	1 11	1/11/	This form is to be filed in	compliance with RULE 1104.		
	Ist Harmellon by	MAGUAN	If this is a request for allowable for a newly drilled or deepened			
-	1679.	,_,_,	well, this form must be accomp tests taken on the well in acco	anied by a tabulation of the deviation		
	Area Administrative	Supervisor		organce with MULE 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.