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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator AMOCO PRODUCTION COMPANY	
Address 501 Airport Drive, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Elliott Gas Com "F" (1-R)	Well No. 1R	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee Federal SF	Lease No. 078139
Location				
Unit Letter B	810	Feet From The North Line and 1590	Feet From The East	
Line of Section 33	Township 30-N	Range 9-W	NMPM, San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Plateau, Inc.	P. O. Box 108, Farmington, New Mexico 87401			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input 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, New Mexico 87401			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
				Is gas actually connected? No When

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

IV. 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					
Date Spudded 12-2-75	Date Compl. Ready to Prod. 1-12-76	Total Depth 4902'	P.B.T.D. 4867'					
Elevations (DF, RKB, RT, GR, etc.) 5783' GL	Name of Producing Formation Mesaverde	Top Oil/Gas Pay 4094'	Tubing Depth 4838'					
Perforations 4094-4104', 4110-32', 4144-58', 4166-74', 4184-96', 4212-36', 4260-78', 4306-18', 4368-82', 4442-54', 4600-10', 4636-52', 4700-30', 4736-54', 4764-70', 4786-4810'		Depth Casing Shoe 4901'						
TUBING, CASING, AND CEMENTING RECORD & 4816-28' x 1 SPF								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13-3/8"	9-5/8"	358'	320					
8-3/4"	7"	2722'	425					
6-1/4"	4-1/2"	2492' to 4901'	380					
	2-3/8"	4838'						

V. 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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	

GAS WELL

Actual Prod. Test-MCF/D 2630	Length of Test 3 hr.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Pitot	Tubing Pressure (shut-in) 437	Casing Pressure (shut-in) 529	Choke Size .75

VI. CERTIFICATE OF COMPLIANCE

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.

L. L. Hamilton
(Signature)
Area Adm. Supvr.
(Title)
January 27, 1976
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 28 1976**, 19
BY **Original Signed by A. R. Kendrick**
TITLE **SUPERVISOR DIST. #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.