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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)	Other (Please explain)
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 Ulibarri Gas Com	Well No. 1A	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter 0	910	Feet From The South	Line and 1620	Feet From The East
Line of Section 35	Township 30N	Range 9W	, 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 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, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 35	Twp. 30N	Pge. 9W	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.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 11-2-76	Date Compl. Ready to Prod. 12-4-76		Total Depth 4800'		P.B.T.D. 4755'			
Elevations (DF, RKB, RT, GR, etc.) 5626' GL, 5639' KB	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 3891'		Tubing Depth 4633'			
Perforations 3891, 3896-3919, 3930-56, 3960-69, 3998-4002, 4006-12, 4016-72, 4076-85, 4087-96, 4172-86, 4210-16, 4228-34, 4255-60, 4291, 4322-35, 4504-20, 4530-70, 4572-76,					Depth Casing Shoe 4792'			
TUBING, CASING, AND CEMENTING RECORD 4586-90, 4609-21, 4629-35 x 1 SPI								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8" csg.		263'		280			
8-3/4"	7" csg.		2699'		525			
6-1/4"	4-1/2" liner		2515-4792'		275			
	2-3/8" tbg.		4633'					

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-MSCF

GAS WELL

Actual Prod. Test-MCF/D 2870	Length of Test 3 hr.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 600	Casing Pressure (shut-in) 714	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.

E. J. L. L. L.
(Signature)

Area Adm. Supvr.

(Title)

December 30, 1976

(Date)

OIL CONSERVATION COMMISSION

APPROVED 12/31/77, 19__

By Original Signed by A. R. Kendrick

TITLE SUPERVISOR DIST. #5

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.