Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

## OIL CONSERVATION DIVISION

DISTRICT II O. Drawer DD, Artesia, NM 88210		Ç.	nta Sa			x 2088	7504-2081	₹					
DISTRICT III 000 Rio Brazos Rd., Aziec, NM 87410									14~ITA				
to the plane ton't tone it to							D AUTHO						
Operator							<del></del>		Well A	PI No. 15224180	0		
AMOCO PRODUCTION COMPA	NY								3004	13224180	<u> </u>		
P.O. BOX 800, DENVER,	COLORA	DO 8020	01										
Reason(s) for Filing (Check proper box)  New Well		Change is	z Transoc	orter of:		П	Other (Pleas	е ехрыи	4)				
Recompletion	Oil	~~	Dry G	Г									
Change in Operator	Casinghe	ad Gas	Conder	neate [									
f change of operator give name ad address of previous operator													
II. DESCRIPTION OF WELL	AND LE	ASE Well No.	Dool N	lama la	cludia	ng Forma	ine		Kind o	Lease	Lea	se No.	
Lease Name GARTNER LS		4A	BLA	NCO 1	MES	AVERD	E (PROR	ATED	GASSiale,	ederal or Fee	<u> </u>		
Location I		1450				FSL		800	) _		FEL	tina	
Unit Letter	_ :		_ Feat Fr	rom The	:		Line and		Fee	a From The _		Line	
Section 33 Townshi	30) ip	N 	Range	81	W		, NMPM,		SAN	JUAN		County	
III. DESIGNATION OF TRAN	SPORT	ER OF C	IL AN	ID NA	TU	RAL G	AS			<del></del>			
Name of Authorized Transporter of Oil		or Conde	nsale			Address	(Give addres				rm is so be sen		
MERIDIAN OIL INC. Name of Authorized Transporter of Casin	ghead Gas		or Dry	Gas [	5	3535 Address	EAST 3 (Give addres	OTH (	Ch approved	FARMING copy of this fo	TON NM	<del>,87401</del>	
EL PASO NATURAL GAS CO	MPANY	l Suc.	Thus	_,	Pue	P.O.	BOX 14	92, I	L PASO	ተ <del>X 79</del>	978		
If well produces oil or liquids, give lucation of tanks.	Unit	30c.	Twp.		ng.				_i				
If this production is commingled with that	from any o	ther lease or	r pool, gi	ve com	mingli	ing order	number:						
IV. COMPLETION DATA		Oil We	11 ]	Gas We	<u> </u>	New \	Well Work	over	Deepen	Plug Back	Same Res'v	Diff Reav	
Designate Type of Completion						Total D	<u>l</u>			P.B.T.D.		L	
Date Spudded Date Compl. Ready to Prod.										1.0.1.0.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay				Tubing Depth			
Perforations						L				Depth Casin	g Shoe		
										<u> </u>		<del></del>	
2.0000 2.70000					.ND	D CEMENTING RECORD  DEPTH SET			<u>,                                    </u>		SACKS CEME	NT	
HOLE SIZE	<del></del>	CASING & TUBING SIZE											
	-				—								
	<del>                                     </del>												
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR	ALLOW	ABLE	l oil and		he equal	to or exceed	top alle	mable for the	s depth or be	for full 24 hour	<u> </u>	
OIL WELL (Test must be after Dute First New Oil Run To Tank	Date of		2 dy 1000	ou unu		Produci	ng Method (i	low, pu	mp, gas lyt.	ERF	IVE	W_	
1 4 67 -	Tubing F	Tubing Pressure					Casing Pressure					<b>W</b>	
Length of Test	Toolag .	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							<u>uu</u>	AUG 2 3 1990			
Actual Prod. During Test	Oil - Ibb	Oil - Ibla.					Water - Bbls.			IL CON. DIV.			
	_1								—	<del>)IF CO</del>	ī. 3		
GAS WELL Actual Prod. Test - MCF/D   Leagth of Test							Bbls. Condensate/MMCF				ondensate		
	<u> </u>						Casing Pressure (Shut-in)			Choke Size			
Festing Method (pitot, back pr.)	Tubing Pressure (Shut-in)					Casing Liceanic (ones, m)							
VI. OPERATOR CERTIFIC	CATE	OF COM	IPLIA	NCE		7[	Oll	$CO_V$	ISFRV	ATION	DIVISIO	N	
I hereby certify that the rules and reg Division have been complied with an	ulations of t	he Oil Cont	ervation			1	OIL!	J-01				-	
is true and complete to the best of my	y knowledge	and belief.		-			Date App	orove	d	AUG 23	1990		
NILIAL								<b>.</b>			1 -		
Signature Signature		<u> </u>				1	Зу		3.	H. O	hand-		
Signature Doug W. Whaley, Staf	f Admi	n. Sup	<u>ervis</u> Tide		_	-	Title		SUPER	VISOR D	STRICT	13	
July 5, 1990		303	=830=	4280 No									
Date		,				()							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.