partment

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

1 AND RIO BIANS RO., MACC, 1401 87410					BLE AND A							
I. Operator	TO TRANSPORT OIL AN					Well API No.						
Amoco Production Comp		3004522894										
Address 1670 Broadway, P. O. 1	Box 800,	Denve	er, C	olorac	lo 80201							
Reason(s) for Liling (Check proper box)					Othe	r (Please exp	lain)					
New Well Recompletion	Change in Transporter of: Oil Dry Gas											
Change in Operator	Casinghead		•									
If change of operator give name and address of previous operator Tent	neco Oil	E & F	61	62 S.	Willow,	Englewoo	od, Color	rado <u>801</u>	55			
II. DESCRIPTION OF WELL												
Lease Name SAN JUAN 32-9 UNIT	Well No. Pool Name, Include 6A BLANCO (MES				ing Formation AVERDE) FEDER			Lease No. 820783860				
Location	1500 F				······································	1050						
Unit Letter	Feet From The				Line	and 1050	Fe	et From The FEL Line				
Section 15 Townshi	31N		Range 91	W	, NN	4PM,	SAN JU	JAN		County		
HL DESIGNATION OF TRAN	SPORTER	OF OI	L ANI) NATU	JRAL GAS							
Name of Authorized Transporter of Oil or Condensate						Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1429, BLOOMFIELD, NM 87413						
Name of Authorized Transporter of Casing EL PASO NATURAL GAS CON	ed Transporter of Casinghead Gas [Gas [X	Address (Give address to which approved P. O. BOX 1492, EL PASO,			copy of this form is to be sent)				
If well produces oil or liquids,		Sec.	Twp.	Rge	· · · · · · · · · · · · · · · · · · ·		When		70			
give location of tanks. If this production is commingled with that	from any other	lease or n	not pive	commins	line order numb	er:	l					
IV. COMPLETION DATA												
Designate Type of Completion Date Spudded		Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v		
	Date Compl.	Ready to	Prod.		Total Depth	. <u></u>	_11	P.B.T.D.		- L		
Ulevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas I	Top Oil/Gas Pay			Tubing Depth			
Perforations					1			Depth Casing Shoe				
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT				
HOLE SIZE	CASING & TOBING SIZE				DEFINGE							
V. TEST DATA AND REQUES				andre de region estandos e e .								
OIL WELL (Test must be after r Date First New Oil Run To Tank	ecovery of total	il volume o	of load o	il and mus			lowable for this nump, gas lýt, e		full 24 hou	-5.)		
								122				
Length of Test	Tubing Pressure				Casing Pressu	re		Choke Size				
Actual Prod. During Test	Oil - Ubls.				Water - Bbls.			Gas- MCF				
GAS WELL					.1			J				
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate				
lesting Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size				
VI ODED ATOD GERTING	ATE OF	CONTR		CE.	\r							
VI. OPERATOR CERTIFICATE OF COMPLIANCE Thereby certify that the rules and regulations of the Oil Conservation Taking hours have a required within the other the information since them.				OIL CONSERVATION DIVISION								
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date ApprovedMAY 0.8.1989							
and Than other						1						
Signature J. O. Lamp lan					Ву	11 -						
J. L. Hampton Sr. Staff Admin. Suprv					Title	SUPERVISION DISTRICT # 3						
Janaury 16, 1989 303-830-5025 Date Telephone No.												

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
- 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.