Submit 5 Copies
Appropriate District Office
DISTRICT L
P.O. Box 1980, Hobbs, NM 88240

State of New Mex Energy, Minerals and Natural Res

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

OIL CONSERVATION DIVISION

DISTRICT II P.O. Drawer DD, Artesia, NM 88210	P.O. Bo Santa Fe, New Me.	x 2088	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQUEST FOR ALLOWAB	LE AND AUTHORIZATION	
I.	TO TRANSPORT OIL	AND NATURAL GAS	I No.
Operator Ope		23382	
Amoco Production Comp	any	, poo 13	
1670 Broadway, P. O.	Box 800, Denver, Colorado	80201	
Reason(s) for Filing (Check proper box)	Company of	Other (Please explain)	
New Well Recognition	Change in Transporter of: Oil Dry Gas		
Recompletion 1 _3	Casinghead Gas Condensate		
	nneco Oil E & P, 6162 S. V	Willow, Englewood, Color	ado 80155
II. DESCRIPTION OF WELL	AND LEASE		
Lease Name	Well No. Pool Name, Includir		Lease No.
SAN JUAN 32-9 UNIT	23A BLANCO (MESA	AVERDE) FEDER	AL 820785090
Location F	: 1600 Feet From The FNI	L Line and 1490 Fee	I From The FWL Line
		CAN THE	
Section 5 Townsh	hip31N Range9W	, NMPM, SAN JU	THY COUNTY
III. DESIGNATION OF TRAI	NSPORTER OF OIL AND NATU	RAL GAS	falls from in to be seed)
Name of Authorized Transporter of Oil or Condensate of Oil Page 1874 13			
CONOCO Name of Authorized Transporter of Casi		Address (Give address to which approved copy of this form is to be sent)	
EL PASO NATURAL GAS CO	OMPANY	P. O. BOX 1492, EL PASO,	TX 79978
If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connected? When	7
give location of tanks.	Comming	ling order number:	
IV. COMPLETION DATA	at from any other lease or pool, give comming		
f ====================================	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v Diff Res'v
Designate Type of Completion		Total Depth	P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
		DECORP.	
	TUBING, CASING AND CASING & TUBING SIZE	CEMENTING RECORD DEPTH SET	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEI MICE.	
V. TEST DATA AND REQU	EST FOR ALLOWARLE	<u> </u>	
OIL WELL (Test must be after	er recovery of total volume of load oil and mus	it be equal to or exceed top allowable for thi	s depth or be for full 24 hours.)
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lyt,	nc)
The state of Park	Tubing Pressure	Casing Pressure	Choke Size
Length of Test	Tubing Freshold		A CONTRACTOR OF THE PARTY OF TH
Actual Prod. During Test	Oil - Bbls.	Water - Bbis.	Gas- MCF
GAS WELL	11 and of Tay	Bbls, Condensate/MMCF	Gravity of Condensate
Actual Prod. Test / MCF/D	Length of Test		• • • • • • • • • • • • • • • • • • • •
Testing Method (puot, back pr.)	Tubing Pressure (Shut in)	Casing Pressure (Shut in)	Clioke Size
M. Open Aron Centre	ICATE OF COMPLIANCE		ATION DU MOION
VI. OPERATOR CERTIFICATE OF COMPLIANCE Thereby certify that the rules and regulations of the Oil Conservation OIL CONSERVA		ATION DIVISION	
Division have been complied with a is true and complete to the best of r	and that the information given above		4AV 0.9 1000
		Date Approved	MAY 08 1989
4. 7. Han	noton	Ву	> Chan/
Signature	Sr. Staff Admin. Suprv.		ISION DISTRICT # 3
J. L. Hampton Printed Name	Title	Title	
Janaury 16, 1989	303-830-5025	11	

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

Date

- 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.

Telephone No.

- 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.