ERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			Γ
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

TRANSPORTER OIL	REQUEST F	FOR ALLOWABLE)	
OPERATOR PROBATION OFFICE	AUTHORIZATION TO TRAI	AND NSPORT OIL AND NATU	JRAL GAS			
Operator Amoco Production Com	npany			8989	4-	
Address				30,0		
Reason(s) for filing (Check proper	Farmington, NM 87401					
New Well X	Change in Transporter of:	Other (Pleas	e explain)	0,40		
Recompletion	 -	물 **, *** 날				
Change in Ownership		densate				
If change of ownership give nam and address of previous owner	•					
DESCRIPTION OF WELL AN						
Lease Name Taft Gas Com	Well No. Pool Name, Including 1E Basin Dakot		Kind of Leas		Lease No	
Location	243211 24102		Sidle, Federa	lorF•• Federal	NM0546	
Unit Letter;;	860 Feet From The north	ine and1550	Feet From '	The		
Line of Section 14	Township 30N Range	13W NMPM	, San J	Juan	C	
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL O	746			County	
Name of Authorized Transporter of	Oil or Condensate AA	Address (Give address t	o which appro	ved copy of this form is to	o be sent)	
Plateau, Inc. Name of Authorized Transporter of	Casinghead Gas or Dry Gas XX	P. O. Box 26251, Albuquerque, NM 87125				
El Paso Natural Gas		P. O. Box 990, Farmington, NM 87401				
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. C 14 30N 13W	is gas actually connects	d? Whe	en		
If this production is commingled	with that from any other lease or pool			7-8-83		
COMPLETION DATA	Oll Well Gas Well	New Well Workover				
Designate Type of Comple	X	X	Deepen !	Plug Back Same Res!	v. Diff. Res!	
Date Spudded 3-29-83	Date Compl. Ready to Prod. 4-29-83	Total Depth		P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.,		Top Oil/Gas Pay		6563 Tubing Depth		
5828 GL	Dakota	6418'		6462'		
0170 0210 9	6520'-6526', 6534'-6552' 439', 6474'-6480', 6488'-6	2 JSPF, 118 6490 .38" in dia		Depth Casing Shoe		
HOLE SIZE	TUBING, CASING, AN	ID CEMENTING RECORD)	[6603		
12-1/4"	8-5/8" 24# K-55	DEPTH SE	Т	SACKS CEME	ENT	
7-7/8"	4-1/2" 10.5# J-55	6605'		300 1425		
	2-3/8"	6462'				
TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be t	after recovery of social volum	e of load oil a	nd must be sound as a		
OIL WELL Date First New Oil Run To Tanks	able for this d	epin or be jor juit 24 hours			ceed top allo	
		Producing Method (Flow, pump, gas lift, etc.)				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		······································	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Water-Bbis. Gas-MCF			
					· · · · · · · · · · · · · · · · · · ·	
Actual Prod. Test-MCF/D						
733	Length of Test 3 hrs.	Bbis. Condensate/MMCF		Gravity of Condensate		
Feeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-i	<u>)</u>	Choke Size		
back pressure	1920 psi	1930 psi		.75		
ERTIFICATE OF COMPLIAN	CE			ON DIVISION		
hereby certify that the rules and	regulations of the Oil Conservation		UL 281		·	
vision have been complied with and that the information given ove is true and complete to the best of my knowledge and belief.		By Original Signa	Original Signed by FRANK T. CHAVEZ			
Original Signed By		TITLE SUPERVISOR DISTRICT # 3				
Original D.D.	Lawson	This form is to b	e filed in co	mpliance with Ruce	1104.	
_	nature)	well this form must b	inagmossa ed	ble for a newly drilled led by a tabulation of t	or deepens the deviatio	
District Administrative Supervisor (Title) July 28, 1983		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for aller able on new and recompleted wells. Fill out only Sections 1, II, And VI for shanges of ewad well name or number, or transporter, or other such change of condities				
		completed wells.				