Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Anesia, NM 88210
DISTRICT III

DISTRICT.III 1000 Rio Urazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

1,	10	ZHIMIN		ANU NA	TOTAL GA					
Operator Amoco Production Compa		Well a			API No. 1-045-27520					
Address Address			<u> </u>	7.0.0.0		100	$\mathcal{O}_{\mathcal{T}}\mathcal{O}_{\mathcal{T}}$	<u> </u>		
50 ROX 800	Den	ver,	<u>(O)</u>	<u>5020</u>	<u> </u>	· <u>······</u>		···		
Reason(s) for Filing (Check proper box) New Well	C	hange in Tra	กรกorier of	[_] Ou	oct (l'Iease expla	in)				
Recompletion	Change in Transporter of: Oil Dry Gas									
Change in Operator	Casinghead C		ndensate							
If change of operator give name and address of previous operator		<u> </u>			· · · · · · · · · · · · · · · · · · ·				J	
II. DESCRIPTION OF WELL	AND LEAS	E			· · · · · · · · · · · · · · · · · · ·		······································	· · · · · · · · · · · · · · · · · · ·		
Lease Name	ing Formation	10.10			Le	ase No.				
Stewart B	euitlar	uitland Coal Gas nm 03566								
Unit Letter	: 870	Fc	et From The	50. Lin	ne and [2]	<u></u> Ге	et From The .	West	Line	
Section 28 Township	。多0大		10 V	, N	MPM,	SanC	Juan	•	County	
						(3007)			County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR										
Name of Authorized Transporter of Oil or Condensate					Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Gasinghead Gas or Dry Gas					Address (Give address to which approved copy of this form is to be sent) 874 PO BOX 4990 Farmunaton, MM874					
If well produces oil or liquids,	Unit Sec. Twp. Rge.			is gas actually connected? When						
give location of tanks.	<u>i i</u>				10	i4	4 mo	<u>0.</u>		
If this production is commingled with that IV. COMPLETION DATA	from any other	lease or poo	l, give comming	ling order nur	iber:		•			
Designate Type of Completion	- (X)	Oil We il	Gas Well	i X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.	ani '		
11124/87	1/25/90			T O. (C.)	2758			2706		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Fruitland Coal			Top Oil Cast ay			Tubing Depth			
Perforations	······		^ -		1 0 0 <u> </u>		Depth Casin	ig Shoe	······································	
2438'- 2657	W	14 JE		eo sho						
	TU	BING, CA	ASING AND	CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
12/4"	85	85/8"			261'			235		
77/8"	5	5 /2"		294	2954'			657		
	23/8			2500						
V. TEST DATA AND REQUES	ST FOR AL	LOWAB	LE	<u> </u>	'		<u> </u>			
				i be equal to o	r exceed top allo	wable for thi	s depth or be	for full 24 hou	rs.)	
OIL WELL (Test must be after recovery of total volume of load oil and must Date First New Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)					
Leguth of Test				 			la la el			
Length of Test	Tubing Pressure			Casing Pressure			DIE"	CEIV		
Actual Prod. During Test	Oil - Bbls.			Water - Bble	Water - Bbls.				<u>U</u>	
							MAR 01 1990			
GAS WELL							O II 4		NIV.	
Actual Prod. Test - MCF/D	Length of Test			libls. Condensate/MMCF			Charle of contensals			
171	6.5 hours			Ø			DIST. 3			
lesting Method (pilot, back pr.)	Tubing Pressure (Shut in) pmp			Casing Piessure (Shut-in) pmp			Choke Size			
Libuing	54				54 1,75					
VI. OPERATOR CERTIFICATE OF COMPLIANCE					011 0010551/471011511/101011					
I hereby certify that the rules and regulations of the Oil Conservation					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.				MAR 2 6 1990						
10 21.31 A					Date Approved					
DWWhaley					1 By 3 11 de /					
Sim D.W. Whaley Stathadmin. Super.					By Sunt) Chang					
Printed Name					SUPERVISOR DISTRICT #3					
2/28/90	8.30	Telepho	one 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 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.