Submit 5 Copies
Appropriate District Office
DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

State of New Me Energy, Minerals and Natural Re

Pepartment

Form C-104 Revised 1-1-89 See Instructions

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM. 88210 DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator Amoco Production Company 3004510144 1670 Broadway, P. O. Box 800, Denver, Colorado 80201 Reason(s) for Liling (Check proper box) Other (Please explain) New Well Change in Transporter of: Dry Gas Recompletion Casinghead Gas [Condensate [] [X Change in Operator If change of operator give name

Tenneco Oil E & P, 6162 S. Willow, Englewood, Colorado 80155 II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Lease Name HEATON COM B LS 17 BASIN (DAKOTA) FEDERAL 820780970 Location ___ Feet From The FNL Range 11W SAN JUAN Section 32 Township 31N III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS or Condensate Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) 5/ (. Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas X EL PASO NATURAL GAS COMPANY . O. BOX 1492, EL PASO, TX 79978 Twp is gas actually connected? If well produces oil or liquids, Unit When 7 give location of tanks. l... 1 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well | Gas Well New Well | Workover | Deepen | Plug Back | Same Res'v Designate Type of Completion - (X) 1 Date Compl. Ready to Prod. P.B.T.D. Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RF, GR, etc.) Tubing Depth Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE OIL, WELL, (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hows) Date Lits New Oil Run To Tank Producing Method (Flow, pump, gas lyt, etc.) Date of Test Choke Size Length of Test Casing Pressure lubing Pressure Actual Prod During Test Water - Bbls. GAS WELL. Length of Test Bbls. Condensate/MMCF Gravity of Condensate Actual Prod. Test - MCF/D Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size Lesting Method (pitot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Date Approved _ MAY 08 1000 Supature Sr. Staff Admin. Suprv. L. Hampton SUPERVISION DISTRICT # 5 303-830-5025 Title_ Janaury 16, 1989 Telephone No. Date

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

- 1) Request for allowable for newly drifted 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.