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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Amoco Production Company	
Address 501 Airport Drive, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name Stanolind Gas Com "B"	Well No. 1	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee Federal	Lease No. NM-019414
Location Unit Letter <u>I</u> ; <u>1390</u> Feet From The <u>South</u> Line and <u>890</u> Feet From The <u>East</u> Line of Section <u>9</u> Township <u>32N</u> Range <u>12W</u> , NMPM, <u>San Juan</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) Plateau, Inc. P.O. Box 26251, Albuquerque, NM 87125					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) El Paso Natural Gas Company P.O. Box 990, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit <u>I</u>	Sec. <u>9</u>	Twp. <u>32N</u>	Rge. <u>12W</u>	Is gas actually connected? <u>NO</u>	When

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
		<u>X</u>	<u>X</u>					
Date Spudded <u>5-17-80</u>	Date Compl. Ready to Prod. <u>11-25-81</u>		Total Depth <u>7109'</u>		P.B.T.D. <u>7008'</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>6071' GL</u>	Name of Producing Formation <u>Blanco Mesaverde</u>		Top Oil/Gas Pay <u>3979'</u>		Tubing Depth <u>4520'</u>			
Perforations <u>3979'-3984'</u> , <u>3991'-4010'</u> , <u>4014'-4024'</u> , <u>4028'-4031'</u> , <u>4036'-4040'</u> , <u>4426'-4464'</u> , <u>4474'-4511'</u> , <u>4514'-4517'</u> , <u>4523'-4527'</u> , <u>4557'-4577'</u> , <u>4592'-4599'</u>					Depth Casing Shoe <u>-</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>12-1/4"</u>	<u>9-5/8"</u>		<u>372'</u>		<u>300 sx</u>			
<u>8-3/4"</u>	<u>7"</u>		<u>7105'</u>		<u>2315 sx</u>			
	<u>2-1/8"</u>		<u>4520'</u>					

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 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D <u>442</u>	Length of Test <u>3 hours</u>	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) <u>Back pressure</u>	Tubing Pressure (Shut-in) <u>935 PSIG</u>	Casing Pressure (Shut-in) <u>935 PSIG</u>	Choke Size <u>.75"</u>

CERTIFICATE OF COMPLIANCE

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.

E. S. GONZALES

(Signature)

District Administrative Supervisor

(Title)

(Date)

OIL CONSERVATION DIVISION

6-24-82

APPROVED _____, 19__

BY Original Signed by CHARLES GHOLSON

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

501 Airport Drive, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1390' FSL x 890' FEL

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

(other) Perforate and test Gallup/Greenhorn formation (Submitting sundry at USGS request per telecon Mr. Elliott (USGS) and Bob Catlier (Amoco))

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Amoco Production Company plans to perforate and test the Gallup/Greenhorn formations as follows:

Gallup

1. Set bridge plug at 6350'.
2. Perforate IES-GR intervals 6139-6144', 6148-6166', 6170-6176', 6180-6216', 6220-6223', and 6226-6260' with 2 JSPF.
3. Breakdown with 100 bbls of 2% KCl water with 1 gallon/1000 surfactant and 150 ball sealers.
4. Run junk basket.
5. Set bridge plug at 6100'.

(over)

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED _____

TITLE Dist. Adm. Supvr. DATE _____

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY: _____

TITLE _____

DATE _____

For JAMES E. SING
DISTRICT ENGINEER

(See Instructions on Reverse Side)

NMOCC

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

6. Perforate IES-GR intervals 5968-5988', 5994-6006' and 6026-6058', with 2 SPF.
7. Breakdown with 64 bbls, 2% KCl water with 1 gallon/1000 surfactant and 95 ball sealers.
8. Run junk basket.
9. Retrieve bridge plug at 6100'.
10. Swab or flow well back.

Greenhorn

1. Set bridge plug at 6830'.
2. Perforate IES-GR intervals 6722-6778' with 2 JSPP.
3. Breakdown with 1000 gallons of 15% HCl with 1 gallon/1000 surfactant and 75 ball sealers.
4. Run junk basket.
5. Swab on flow well back and test interval 6722-6778'.