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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of Hew Mexico Energy, Minerals and Natural Resources Department

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICE II P.O. Drawer DD, Antesia, PM 88210

Santa Fe, New Mexico 87304-2

			AND NATURAL GA				4
Operator		ANOI OTT OIL	THE WHOTHE ON	Weil A	rl No.	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	i
Amoco Production Co.		045-27906					
Address	:						
P. O. Box 800, Denve	er, CO 8020	1					
Reason(s) for Filing (Check proper box)			Other (Please explain	in)			
New Well XX		in Transporter of:					
Recompletion		Dry Gas					
Change in Operator 1_1	Casinghead Gas	Condensate					
If change of operator give name and address of previous operator							
•	ANDERICE						
II. DESCRIPTION OF WELL / Lease Name		. Pool Name, Includi	no Formation	Kind o	( Lease	Leas	e No.
Horton Gas Com "B"	3	1	tland Coal Gas	4	ederal MXXX		
Location	· · · · · · · · · · · · · · · · · · ·	Dustil ITul	crana coar aus		·		
Unit Letter	: 2240	_ Feet From The	S Line and1070	) Fee	t From The	W	Line
Section 29 Township	32N	Range 11W	, NMI'M,	San	Juan		County
try - typovoki amonki om ma ckie	CDANDTED AS	(NEC A NUN XIA TEL	DAT CAC				
III. DESIGNATION OF TRANS Name of Authorized Transporter of Oil	or Cond		Addiess (Give address to wh	ich opproved	copy of this form	is to be sent	)
,	السا	L}		• •			
Name of Authorized Transporter of Casing	head Gas	or Dry Gar [X]	Addiess (Give address to wh	ich approved	copy of this form	is to be sent	)
Amoco Production Co.			P. O. Box 800, Denver, CO 80201				
			Is gas actually connected?	?			
give location of tanks.	<u> </u>	ll		l			
If this production is commingled with that f	rom any other lease of	or pool, give comming	ling order number:				
IV. COMPLETION DATA							
Designate Time of Constitution	Oit W	ell Gar Well	New Well Workover	Deepen	Plug Back   Sar	ne Res'v	Dill Res'v
Designate Type of Completion -		X	X	<u> </u>	,		
Date Spudded	Date Compl. Ready	to Prod.	Total Depth		P.B.T.D.		
9/11/90	11/26/9		Top Olugae Pay	3343'			
Elevations (DF, RKB, RT, GR, etc.) 6512 GR	Name of Producing		2904	Tubing Depth 2922 <sup>1</sup>			
Perforations	Fruitland	CUAI	2904	Depth Casing Shoe			
See attached			,		,		
	TUBINO	G. CASING AND	CEMENTING RECOR	D	!		
HOLE SIZE		TUBING SIZE	DEPTH SET	SACKS CEMENT			
12-1/4"		-5/8"	280'	240 sx C1 B			
7-7/8"		-1/2"	3365'		(1st Stg) 150 sx Cl B		
	2	-3/8"	2922'		tail, w/ 200 sx Cl G,		
		*** ***					sx Cl G,
Y. TEST DATA AND REQUES			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	11.6.41		60 SX (	
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Test	ne of load oil and mis	the equal to or exceed top allo Producing Method (Flow, pr			idi 24 hours	·)
Date this few on Run to tank	Date of Test		Trondenig mento (From, 7	177		1 1 1 10	
Length of Test	Tubing Pressure		Casing Pressure	<del> </del>   <u> </u>	EGZE	W E	11)
				L/V	// MI		
Actual Prod. During Test	Oil - Dbls.		Water - Ibls.		MARU1	1991.	<b>13</b>
	1						
GAS WELL				C	IL CON	. DIV	1
Actual Prod. Test - MCI7D	Length of Test		Ibls. Condensate/MMCF	· · · · · · · · · · · · · · · · · · ·	Gravi DE Fon		<b>-</b>
121	1	24	0		4.11	0	
Festing Method (pitot, back pr.)	Tubing Pressure (Shot-in)		Casing Pressure (Shut-in)		Choke Size		- :
Flowing	200		340		]3	0/64	
VI. OPERATOR CERTIFIC	ATE OF CON	MPLIANCE				भ	
I hereby certify that the rules and regul				userv.	ATION D	VISIO	N
Division have been complied with and							
is true and complete to the best of my l	Date Approve	edM	AR 0 1 100	·			
X\.\.\\				441	, VIIII		
W. Lhaly	<del></del>		Ву	-	_1	٠,	
Signature D. W. Whaley, Staff		المساط	7. Chan				
Printed Name Title			Title	SUPERV	SOR DISTR	<b>Y</b>	
2/8/91	(303) 830-4		Tille		-VII VISI F	# <del>UT / 3</del>	<del></del>
Date for		Telephone No.				٠	
THE RESIDENCE OF THE PROPERTY	ACCRECATION REPORTS AND ASSESSED.	ARTHUR SAMORES OF THE		CHILDRE	TARROYS OF THE PARTY OF	Allend Shirt Colored	THE REPORT OF THE PARTY OF THE

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 404 must be filed for each pool in multiply completed wells,

## Submit to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Departs

Form C-105

Fee Leake 6 copies	C K	87,		u vegonices t	chamicut		Revised 1-1-89	
P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION					WELL API NO.			
DISTRICT II P.O. Drawer DD, Anesia, NM 88210					30 045 27906  5. Indicate Type of Lease			
		of the trick!	07504-20	700		STATE FEE		
DISTRICT III LUX) Rio Brazos Rd.,	, Axtec, NM 87410					6. State Oil & Gas	Lease No.	
WELL	COMPLETION (	OR RECOMP	LETION REP	ORT AND L			יינורול אינורול אינורול אינורול אינור אינורול אינור אינו	
WELL COMPLETION OR RECOMPLETION REPORT AND LOG  12. Type of Well: OIL WELL GAS WELL DRY DRY Coal Seam						7. Lease Name or Unit Agreement Name		
b. Type of Completion		. 21.1	· ·			-	0	
WEW WOR	ж — · —	PLUO BACK	סווס –			Horton Ga	as Com "B"	
2. Name of Operator		BACK [_]	RESVR UTI N	TR .				
AMOCO Proc 3. Address of Operato	duction Com	pany AT	TN: J.I.	HAMPTO	И,	8. Well No.		
,	_					9. Pool name or Will		
P. O. Box 800 Denver, Colorado 80201						Basin Fruitland Coal Gas		
Unit Letter	<u>L</u> : 2240	_ Feet From The	South	Line .	. 1070			
				Line .	and	Feet From Th	we West Li	
Section 10. Date Spudded	29 11. Date T.D. Reached	Township	,	Range 11 W	٧ -	IMPM San Ji	uan County	
9/11/90	9/1.5/90	1	Compl. (Ready to F	Prod.) 13.	Elevations (D.	F& RKB, RT, GR, etc.)	14. Elev. Casinghead	
15. Total Depth	16. Mug Back		17. If Multiple Cr Many Zones?	ompl. How	651.21			
3400'	3343'		Many Zonce?	1	Drilled B	Rotary Tools y yes	1 Cable Tools	
19. Producing Interval(s 2	904'-3161 F	Fop, Bottom, Name Er Hitland	Conl				Directional Survey Made	
<ol><li>Type Electric and Or</li></ol>	ther Logs Run						no	
Density, Ca 23.	liper, Gamm	a Ray, M	icro log			22. Was Well Corec		
		CASING R	ECORD (R	eport all str	inos sal in	11)	no	
CASING SIZE 8 5/8"		DEPT	11 SET	HOLE SIZE		Well) MENTING RECORD	2 11/0/05	
5½"	24#	280 3365'		124"	240s	x Cl B	n	
		dowel		7/8"	( st st	g)150sx Cl ( well,(2nd st	G 0	
DV tool Set @	7 7 7 7		Cl G do	Well, Tai	1 w/60s	well,(2nd st x Cl G dowe	g)	
DV tool Set @ 4.		LINER RECO				31 0 001/0	L.L.	
SIZE	ТОР	LINER RECOI	SACKS CEMEN	(I. Cons.	25.	TUBING		
			ONCRO CEMEN	SCREI		SIZE DEI	PIN SET PACKER SET	
. Perforation reco	rd (interval size a	nd numbers						
2904'-2906' 2951'-2963'	rd (interval, size, a		5" 12	27. AC	ID, SHOT, I	FRACTURE, CEM	IENT, SQUEEZE, ETC.	
20001			5" 56 5" 8		-2963'	55500 gal s	KIND MATERIAL USED Slick water, 510	
	and the second s	,	5" 40				sn, 9600# 20/40	
<b>L</b>			PRODUCT	<u> 3070'-</u>		142800 gal s	lick water,93600	
nc Linu Production	Prod	luction Method (FI	owing, gas lift, pw	riping - Size and	(ype purus)		# 40/70 Status (Prod. or Shurin)	
ate of Test	Hours Tested	Flowing Choke Size	The second second			SI/W	VO/Pipeline	
1/26/90	24	30/64	Prod'n For Test Period	Oil - Вы, 0	Gas - MC		l. Gas - Oil Ratio	
ow Tubing Press.	Casing Pressure	Calculated 24- Hour Rate	Oil - Bbl.	Gas - MC		cr - Bbl.   Oil C	Gravity - API - (Corr.)	
Disposition of G25 (Sol	340	1 1	0	121	0		7411 (COT.)	
To be sold		eic.j				Test Witnessed B	У	
List Attachments								
Cement repor	ts information of					_		
I hereby certify that t		n on both sides o	of this form is tri	ie and complet	= 10 lhe best o	f my knowledge and	belief	
Signature V	Nambis	Mains	rinted	11	Q			
- 1	- visery	'4 <del>UD</del>	напк <u>Л. Г.</u>	Her Plon	Tìde	क्षा । । । । । । । । । । । । । । । । । । ।	Date[2][2]90	