

District I
PO Box 1980, Hobbs, NM 88241-1980
District II

811 South First Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104

Revised October 18, 1994

Instructions on back

Submit to Appropriate District Office

5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Amoco Production Company P. O. Box 800 Denver, Colorado 80201		OGRID Number 000778
		Reason for Filing Code New Well
API Number 30 - 04529146	Pool Name Basin Fruitland Coal	Pool Code 71629
Property Code	Property Name Eva Lou Gas Com	Well Number #1

II. Surface Location

UL or lot no. M	Section 35	Township 32N	Range 11W	Lot Idn	Feet from the 935	North/South Line South	Feet from the 1205	East/West line West	County San Juan
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Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Use Code F	Producing Method Code	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
087057	El Paso P. O. Box 1492 El Paso, Texas	2814637	G	

RECEIVED
MAR 21 1995

OIL CON. DIV.

IV. Produced Water

POD 2814638	POD ULSTR Location and Description DIST. 3
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V. Well Completion Data

Spud Date 2/10/95	Ready Date 3/10/95	TD 3006'	PBTD 2965'	Perforations	DHC, DC, MC
Hole Size 12 1/4"	Casing & Tubing Size 7 5/8"	Depth Set 274'	Sacks Cement 195 sacks C1 B		
7 7/8"	5 1/2"	3004'	703 sacks C1 B		
	2 7/8"	2730'			

VI. Well Test Data

Date New Oil	Gas Delivery Date 2/25/95	Test Date 2/25/95	Test Length 63.5 hrs.	Tbg. Pressure	Csg. Pressure 30#
Choke Size 1/2"	Oil 0	Water 197 bbls	Gas 175 mcf/d	AOF	Test Method Flowing

I hereby certify that the rules 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.

Signature: *Gail M. Jefferson*

Printed name: Gail M. Jefferson

Title: Business Assistant

Date: 03-20-1995

Phone: (303) 830-6157

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY ERNIE BUSCH

Title: DEPUTY OIL & GAS INSPECTOR, DIST. #3

Approval Date: MAR 21 1995

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

31.	inside diameter of the well bore	
32.	Outside diameter of the casing and tubing	
33.	Depth of casing and tubing. If a casing liner show top and bottom.	
34.	Number of sacks of cement used per casing string	
35.	MO/DA/YR that new oil was first produced	
36.	MO/DA/YR that gas was first produced into a pipeline	
37.	MO/DA/YR that the following test was completed	
38.	Length in hours of the test	
39.	Flowing tubing pressure - oil wells	
40.	Flowing casing pressure - oil wells	
41.	Diameter of the choke used in the test	
42.	Barrels of oil produced during the test	
43.	Barrels of water produced during the test	
44.	MCF of gas produced during the test	
45.	Gas well calculated absolute open flow in MCF/D	
46.	The method used to test the well:	
	Flowing	
	Pumping	
	Swabbing	
	If other method please write it in.	
47.	The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report	
48.	The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person	
1.	Operator's name and address	
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	
3.	Reason for filling code from the following table: NW New Well RC Recompletion CH Change of Operator (include the effective date.) AO Add oil/condensate transporter CO Change oil/condensate transporter AG Add gas transporter CG Change gas transporter RT Request for test allowable (include volume requested) If for any other reason write that reason in this box.	
4.	The API number of this well	
5.	The name of the pool for this completion	
6.	The pool code for this pool	
7.	The property code for this completion	
8.	The property name (well name) for this completion	
9.	The well number for this completion	
10.	The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the "UL or lot no." box. Otherwise use the OCD unit letter.	
11.	The bottom hole location of this completion	
12.	Lease code from the following table: F Federal S State P Fee J Jicarilla N Navajo U Ute Mountain Ute I Other Indian Tribe	
13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift	
14.	MO/DA/YR that this completion was first connected to a gas transporter	
15.	The permit number from the District approved C-129 for this completion	
16.	MO/DA/YR of the C-129 approval for this completion	
17.	MO/DA/YR of the expiration of C-129 approval for this completion	
18.	The gas or oil transporter's OGRID number	
19.	Name and address of the transporter of the product	
20.	The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.	
21.	Product code from the following table: G Gas O Oil	
22.	The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (example: "Battery A", "Jones CPD", etc.)	
23.	The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.	
24.	The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (example: "Battery A Water Tank", "Jones CPD Water Tank", etc.)	
25.	MO/DA/YR drilling commenced	
26.	MO/DA/YR this completion was ready to produce	
27.	Total vertical depth of the well	
28.	Plugback vertical depth	
29.	Top and bottom perforation in this completion or casing shoe and TD if openhole	
30.	Write in "DHC" if this completion is downhole commingled with another completion, "DC" if this completion is one of two non-commingled completions in this well bore, or "MC" if there are more than three non-commingled completions in this well bore.	