

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Amoco Production Company		Well API No. 30-045-27143
Address 2325 East 30th Street, Farmington NM 87401		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

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II. DESCRIPTION OF WELL AND LEASE

Lease Name Ridenour Gas Com A	Well No. 1	Pool Name, Including Formation Basin Fruitland Coal Gas	Kind of Lease State, Federal <u>or Fee</u>	Lease No.
Location Unit Letter <u>G</u> : <u>1450'</u> Feet From The <u>N</u> Line and <u>1550'</u> Feet From The <u>E</u> Line Section <u>13</u> Township <u>31N</u> Range <u>11W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co.	Caller Service 4990, Farmington NM 87499					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					No	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 11-21-88	Date Compl. Ready to Prod. 1-7-89	Total Depth 2772'	P.B.T.D. 2717'					
Elevations (DF, RKB, RT, GR, etc.) 5866' GR	Name of Producing Formation Fruitland	Top Oil/Gas Pay 2498'	Tubing Depth 2473'					
Perforations 2498'-2507', 2544'-2576'			Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8" 24# K55	262'	500 sx					
7-7/8"	5-1/2" 17# N80	2766'	365 sx & 220 sx					
		bradenhead sq 200 sx	cement top 600'					
	2-7/8"	2473'						

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 hours.)

Date First New Oil Run To Tank	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

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GAS WELL

Actual Prod. Test - MCF/D 4-22-89 115 mcf/d	Length of Test 24 hr Pumping	Bbls. Condensate/MMCF 5 BWP	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 70	Casing Pressure (Shut-in) 70	Choke Size

OIL CON. DIV.
DIST. 3

VI. OPERATOR 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.

Kimi K. Stratton
Signature
K. K. Stratton Adm. Supv.
Printed Name
5-11-89 (505) 325-8841
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JUN 07 1989**

By **Original Signed by FRANK T. CHAVEZ**

Title **SUPERVISOR DISTRICT 3**

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.