

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

I. Operator Amoco Production Company		Well API No. 30-059-20302
Address PO Box 606 CLAYTON NM 88415		
Reason(s) for Filing (Check proper box) ☒ New Well ☐ Change in Transporter of: ☐ Recompletion ☐ Oil ☐ Dry Gas ☐ ☐ Change in Operator ☐ Casinghead Gas ☐ Condensate ☐ Other (Please explain) CO2		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name BDCDGL 2232	Well No. 351F	Pool Name, including Formation TUBB - BRAVO DOME 640	Kind of Lease State, Federal or ☒ Fee	Lease No.
Location Unit Letter F 2152 Feet From The WEST Line and 2000 Feet From The NORTH Line Section 35 Township T22N Range R32E NMPM, UNION County				

III. 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)					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
Amoco Production Company	PO Box 606 CLAYTON NM 88415					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					YES	

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
			☒					
Date Spudded 7/27/93	Date Compl. Ready to Prod. 8/13/93	Total Depth 2275		P.B.T.D. 2249				
Elevations (DF, RKB, RT, GR, etc.) 4771	Name of Producing Formation TUBB		Top Oil/Gas Pay 2080		Tubing Depth			
Perforations 2080-2084, 2099-2117, 2124-2131, 2146-2154, 2199-2208, 2216-2223					Depth Casing Shoe 2275			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8.625	1690	450
7 7/8	4.5 F.G.	2275	550

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

GAS WELL

Actual Prod. Test - MCF/D 6400	Length of Test 2 HRS	Bbls. Condensate/Mth/MCF 6.4	Gravity of Condensate
Testing Method (pilot, back pr.) PILOT	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 390 PSI	Choke Size 2"

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.

Signature
Billy E. Prichard **FIELD FOREMAN**
Printed Name
5/1/93 **505.374.3053**
Date
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **8/20/93**
By **[Signature]**
Title **DISTRICT SUPERVISOR**

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

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.