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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-110
Effective 1-1-65

MAY 7 1981

O. C. D.
ARTESIA, OFFICE

Operator
Amoco Production Company ✓

Address
P. O. Box 68 Hobbs, NM 88240

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Oil ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name State IX <i>San Juan</i>	Well No. 1	Pool Name, including Formation <i>El Paso Natural Gas</i> Morrow	Kind of Lease State, Federal or Fee	State	Lease No. LG-5264
Location Unit Letter <i>H</i> ; <i>2030</i> Feet From The <i>North</i> Line and <i>890</i> Feet From The <i>East</i> Line of Section <i>6</i> Township <i>24-S</i> Range <i>25-E</i> , NMPM, County					

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)
<i>El Paso Natural Gas Company</i>	<i>P. O. Box 1492 El Paso, TX 79978</i>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When <i>No Yes 6-29-81</i>

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 Res'v.	Diff. Res'v.
		X	X					
Date Spudded <i>11-15-80</i>	Date Compl. Ready to Prod. <i>4-26-81</i>	Total Depth <i>11046</i>	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) <i>3894.2 GL</i>	Name of Producing Formation <i>Morrow</i>	Top Oil/Gas Pay <i>10864</i>	Tubing Depth <i>10759</i>					
Perforations <i>10864-10972</i>			Depth Casing Shoe <i>11046</i>					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<i>17-1/2"</i>	<i>13-3/8"</i>	<i>437</i>	<i>307 SX Class C</i>
<i>12-1/4"</i>	<i>8-5/8"</i>	<i>2785</i>	<i>1270 SX Class C, 850 SX Lite</i>
<i>7-7/8"</i>	<i>5-1/2"</i>	<i>11046</i>	<i>685 SX Class H, 1135 SX Lite</i>
	<i>2-3/8"</i>	<i>10759</i>	

TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

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 <i>2150</i>	Length of Test <i>24 hrs.</i>	Bbls. Condensate/MCF <i>0</i>	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (shut-in) <i>3050</i>	Casing Pressure (shut-in)	Choke Size <i>13/64</i>

CERTIFICATE OF COMPLIANCE 0+5-NMOCD, A
1-Hou 1-Susp 1-GPM 1-W. Stafford, Hou
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

1-El Paso 1-Moncrief
Greg Mitchell
(Signature)
Admin. Analyst
(Title)
5-5-81
(Date)

OIL CONSERVATION COMMISSION

APPROVED *JUL 2 1981*, 19
BY *Mike Williams*
TITLE *OIL AND GAS INSPECTOR*

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 portions 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.