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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

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

(DEVIATION SURVEYS - BACK SIDE)

Operator Amoco Production Company	
Address BOX 68, HOBBS, N. M. 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	COMPARISON WELL TO No. 5
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	
Dry Gas <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

CASINGHEAD GAS MUST NOT BE
CLOSED UP FOR **3/1/72**
UNLESS AN EXCEPTION TO R-1070
IS OBTAINED

Lease Name FEDERAL A		Well No. 7	Pool Name, Including Formation BOUGH DEVONIAN	Kind of Lease State, Federal or Fee FED	Page No. NM 0450847
Location					
Unit Letter K	2005	Feet From The SOUTH	Line and 1873'	Feet From The WEST	
Line of Section 13	Township 9-S	Range 35-E	NMPM, LEA	County	

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
MOBIL PIPE LINE Co		Box 900, DALLAS TEXAS			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 13	Twp. 9	Rge. 35	Is gas actually connected? No
When					

If this production is commingled with that from any other lease or pool, give commingling order number: **CTB-149**

Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 10-21-71	Date Compl. Ready to Prod. 12-22-71	Total Depth 11966'		P.B.T.D. 11965'					
Elevations (DF, RKB, RT, GR, etc.) 4129' R.D.B.	Name of Producing Formation DEV	Top Oil/Gas Pay 11956'		Tubing Depth 11958'					
Perforations 11956' - 64'	Depth Casing Shoe 11966'								
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2"	11 3/4"		459'		575 Sx				
11"	8 5/8"		4502'		1250 "				
7 7/8"	5 1/2"		11,966'		300 "				

V. 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)			
Date First New Oil Run To Tanks 12-22-71	Date of Test 1-5-72	Producing Method (Flow, pump, gas lift, etc.) DUMPING	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 327	Oil-Bbls. 190	Water-Bbls. 137	Gas-MCF TSTM

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED JAN - 7 1972 , 19	
BY John W. Runyan		BY John W. Runyan	
TITLE Geologist		TITLE Geologist	
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 sections 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.	
Separate Forms C-104 must be filed for each pool in multiply completed wells.			

043-NMDEC-14
1-DIV
1-JEL
1-OBP
1-SUSP
1-R24
(Signature) **AREA SUPERINTENDENT**
(Title)
(Date) **JAN 5 1972**

DEVIATION SURVEYS

<u>DEPTH</u>	<u>DEGREE OFF</u>
250 -	1/4
1450 -	1/2
2029 -	"
2530 -	3/4
2750 -	"
3257 -	"
3750 -	"
4430 -	1/4
4733 -	1/2
5228 -	3/4
5370 -	"
5823 -	1 -
6050 -	1 1/4
7009 -	3/4
7400 -	"
7670 -	"
8343 -	"
8629 -	1 -
9095 -	3/4
9250 -	1 -
9630 -	1 -
10,070 -	1/2
10,300 -	3/4
10,660 -	1 -
10,920 -	"
11,150 -	"
11,300	1 1/2
11,740	1 1/4
11,960	"

The above are true to the best of my knowledge.



AREA SUPERINTENDENT

Sworn to this date, January 5, 1972.

DR. Mearke
Notary Public In & For Lea B N M
My Commission Expires 6-18-72

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JAN 11 1972
OIL CONSERVATION COMM.
LAW & ORDER