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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)	
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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

**CASINGHEAD GAS MUST NOT BE
FLARED AFTER 2/1/73
UNLESS AN EXCEPTION TO B-4070
IS OBTAINED.**

II. DESCRIPTION OF WELL AND LEASE

Lease Name PETERSON C	Well No. 1	Pool (WINDCAT - PENN (CICO))	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Peterson-Pennsylvanian Associated				
Unit Letter I	1980	Feet From The SOUTH	Line and 660	Feet From The EAST
Line or Section 18	Township 5-S	Range 33-E	NMPM, ROOSEVELT	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> MOBIL OIL CORP (TRUCKS)	Address (Give address to which approved copy of this form is to be sent) 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 I	Sec. 18
	Twp. 5	Rge. 33
	Is gas actually connected? No	When

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 10-14-72	Date Compl. Ready to Prod. 11-26-72		Total Depth 7950'		P.B.T.D. 7894'			
Elevations (DF, RKB, RT, GR, etc.) 4445' R.D.B.	Name of Producing Formation CISCO		Top Oil/Gas Pay 7759'		Tubing Depth 7781'			
Perforations 7759'-82'					Depth Casing Shoe 7950'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		1924'		800			
7 7/8"	5 1/2"		7950'		225			
	2 3/8"		7781'					

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 11-26-72	Date of Test 11-29-72	Producing Method (Flow, pump, gas lift, etc.) FLOW	
Length of Test 24	Tubing Pressure 980	Casing Pressure PKR	Choke Size 12/64
Actual Prod. During Test 294	Oil-Bbls. 294	Water-Bbls. 0	Gas-MCF 441

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

VI. CERTIFICATE OF COMPLIANCE

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.

DEC 1 1972
(Signature)
AREA SUPERINTENDENT
(Title)
DEC 1 1972
(Date)

OIL CONSERVATION COMMISSION

APPROVED **DEC 4 1972**, 19
BY **SUPERVISOR DISTRICT I**
TITLE

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.

DEVIATION SURVEYS

<u>DEPTH</u>	<u>DEGREE</u>
517	1/2
988	3/4
1730	"
2412	"
2908	"
2959	1 -
3648	3/4
4243	1 -
4374	"
4867	"
5369	"
5861	3/4
6355	1 -
6952	3/4
7222	"
7422	"
7610	"
7950	CORE

The above are true to the best of my knowledge.



AREA SUPERINTENDENT

Sworn to this date - December 1, 1972.

R. M. Markwood
Notary Public In & For Lea Co. N.M.
My Commission Expires 6-18-74

RECEIVED

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OIL & GAS SURVEYING COMM.
HOBBS, N. M.