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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

I. Operator
AMOCO PRODUCTION COMPANY
Address
BOX 367, ANDREWS, TEXAS 79714
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
**JUST NOT BE
7/1/76
EXCEPTION TO R-5215
IS OBTAINED**

If change of ownership give name and address of previous owner
THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE. **R-5215**

II. DESCRIPTION OF WELL AND LEASE

Lease Name RADCLIFF	Well No. 1	Pool Name, Including Formation PETERSON-PENN-ASSOC	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter M ; 554 Feet From The SOUTH Line and 554 Feet From The WEST Line of Section 17 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"/> AMOCO PROD. CO. (TRUCKS)	Address (Give address to which approved copy of this form is to be sent) Box 1183, HOUSTON, TX	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> TRANSWESTERN PIPELINE COMPANY	Address (Give address to which approved copy of this form is to be sent) 1st Nat'l Bk Bldg. Suite 614 Odessa, Tx.	
If well produces oil or liquids, give location of tanks. B 19 5 33	Unit B	Sec. 19
	Twp. 5	Rge. 33
	Is gas actually connected? No	

If this production is commingled with that from any other lease or pool, give commingling order number: **PLC-47**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 12-31-75	Date Compl. Ready to Prod. 2-21-76		Total Depth 7956		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 4422 GL	Name of Producing Formation PENN (CISCO)		Top Oil/Gas Pay 7754'		Tubing Depth 7704'			
Perforations 7754-62'					Depth Casing Shoe 7956'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8"		DEPTH SET 2037'		SACKS CEMENT 1000			
7 7/8"	5 1/2"		7956'		475			
	2 3/8"		7704'					

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 Tanks 2-19-76	Date of Test 2-21-76	Producing Method (Flow, pump, gas lift, etc.) FLOWING	
Length of Test 24	Tubing Pressure 700	Casing Pressure PKR	Choke Size 14/64"
Actual Prod. During Test 264	Oil-Bbls. 264	Water-Bbls. 0	Gas-MCF 409

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.

013-NMCC-H
1-DIV
1-JEL
1-OBP
1-SUSP
1-RC

Ray W. Cox
(Signature)
ADMINISTRATIVE ASSISTANT
(Title)
5-25-76
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **Jerry**
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.