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-	SANTA FE			
7	FILE			
T	U.\$.G.5.			
Г	LAND OFFICE			
	RANSPORTER	OIL		
	KANSPORTER	GAS		
	OPERATOR			
1.	PRORATION OF			

TW MEXICO OIL CONSERVATION COMMISSI-REQUEST FOR ALLOWARLE

Form C-104 Conservation Old C-104 and C-110

	LE		╢		KEQUEST		LOWABLE		Elloctive 1-1-	65 (C+104 and C+1)
	\$.G.5.	············	 -	ALITI	HORIZATION TO TRA	AND TROPZU	OII AND I	NATHRAL G	ΛS	
<u> </u>	AND OFFICE				IONIZATION TO TRA	1131 01(1	OIL AID	MIONAL O	~ 3	
—	RANSPORTER	OIL								
Ľ	TANSFORTER .	GAS								•
ļ	PERATOR		├							
•	RORATION OFF	ICE	11_	<u>l</u>						
		Amoc	o Pro	duction C	ompany					
Add	Amoco Production Company									
		P.O.	Draw	ver A, Lev	elland, Texas	79336				
- 1	uson(s) for filing (Check p	proper be	Not	ice of		Other (Pleas	e explain)		
1	w ₩ 11	님		Oli Oli	≘lfi Tranëporter qd: ☐ Dry Ga	• 🗓			ed-Peterson	
i	completion ange in Ownership	H			77	sate X	Penn Ass Fusselma		nd Peterson	
<u> </u>							Lusseim	ш		
	hange of owners address of prev									
and	address of prev	1045 04	· · · · · · · · · · · · · · · · · · ·							
	SCRIPTION O	F WEL	L ANI	D LEASE	o. Pool Name, Including F	nemation.	0.00	Kind of Lease		Legae No.
1	ase Name			Well N	l		R.560	State, Federal	or Fee Fee	Ledge No.
	<u>wearingen C</u>	<u> </u>			Peterson Per	III ASSU	10.	<u></u>	166	
		!		55/ 500 5	rom The South Lin	e and	2078	Feet From T	he West	
	Unit Letter N	<u> </u>	. i	<u> </u>	10m 1mg					
	Line of Section	18	τ	Cownship	5-S Range	33-E	, NMPN	, Roo	<u>sevelt</u>	County
						_		÷		
I. DE	SIGNATION O	F TRA	NSPO	RTER OF O	L AND NATURAL GA	S Address	(Give address	to which approv	ed copy of this form is	to be sent)
1	moco Produc				-74	1	•	, Houston,		
No.	me of Authorized	Transpo	lo sets	Casinghead Gas	or Dry Gas X	Address	(Give address	to which approv	ed copy of this form is	to be sent)
,	ities Servi				 -			a, Oklahom	na 74102	
	well produces oil				ec. Twp. P.ge.	Is gas ac	tually connect	:		
	re location of tank			; B ;	19	Υe	es	<u></u>	<u>9-6-77</u>	
If th	his production is	commi	ingled v	with that from	any other lease or pool,	give com	mingling orde	r number:	1.C-47	
/, <u>co</u>	MPLETION D.	ATA_			Oil Well Gas Well	New Well	Workover	Deepen	Plug Back Same Re	s'v. Diff. Res'v
	Designate Typ	e of C	omple	tion - (X)	X	!	!	1	!	. X
Da	ite_Sawdeled- Ope					Total De	pth		P.B.T.D.	
q	1-77			9-19		<u> </u>	79891		7980'	
Ele	evations (DF, RKE	3, RT, G	R, etc.	; Name of Pr	oducing Formation	Top Oil/	Gas Pay		Tubing Depth	
	1429' GR			Penn		1	7684'		7687 Depth Casing Shoe	· · · · · · · · · · · · · · · · · · ·
1 '	7684'-87', 7696'-7706'									
-/	684 -87	/090	-//00)	TUBING, CASING, AND	CEMEN	TING RECO	₹D		
-	HOLE	SIZE		CASI	NG & TUBING SIZE	T	DEPTH S		SACKS CE	MENT
-										
						<u> </u>				
									ļ	
L						1			1	
	ST DATA ANI	D REQ	UEST	FOR ALLOV	VABLE (Test must be a able for this do	fter recove pth or be f	ry of total vol for full 24 hour	ume of load oil (s)	and must be equal to or	exceed top Gitot
	I, WELL ite First New Oil 1	Run To	Tanks	Date of Te				w, pump, gas lif	i, etc.)	
									.	
L.	ength of Test			Tubing Pre	saure	Casing ;	clessme		Choke Size	
						Water - B	hl=		Gae-MCF	
٨٥	tual Prod. During	Test		Oil-Bble.		muter-2	518.			
<u> </u>						<u> </u>				
C /	AS WELL									
	ctual Prod. Test-	MCF/D		Length of	Test	Bbls. Co	ondeneate/MMC	F	Gravity of Condensat	le .
	150			24 hr	`\$		0		48.5	
T	esting Method (pit	ot, back	pr.)		saure (Shut-in)	Casing	Pressure (Shu	t-in)	30/64	
L	Orifice M	eter		420)	 	1300			
I. CE	ERTIFICATE O	of Co	MPLIA	INCE		1	OIL	CONSERVA	TION COMMISSIO	אכ
					Alaba Ott Camaninisti	APPR	OVED		11 11	, 19
C	mmlasion have	by certify that the rules and regulations of the Oil Conservation saion have been complied with and that the information given						~1		
abo	above is true and complete to the best of my knowledge and belief.					BY	BY			
					TATE	E				
-				0	1	-	his form is i	o be filed in a	compliance with RUI	E 1104,
			7	Ray W.	Cóp	II .		mant for allow	able for a newly dri	Had or deepens
Ray W. Cop 0 & 4-NMOCC-A (Signature)					11	well, this form must be accompanied by a tabulation of the deviation tosts taken on the well in accordance with MULE 111.				
1-Div Administrative Assistant					ll a	II sections o	f this form mu	at be filled out comp	lutely for allow	
	T-JMG (Title)					ll able	a bas wear ac	ecompleted we	11.	
	1-EL	7 7		7/7)	1//	Wall -	ill out only	Sections I, II er, or transport	, III, and VI for cher, or other such cha	nue of conditio
	1-Phillips- 1-Susp.	uaess	d	(Dute)		11				
	1 (

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CH CONSTRUATION COMM.