VERGY AND MIN-RALS DEPARTMENT

2-27-92 (Date)

JIL CONSERVATION DIVISIC A

	B O B	OX 2088			
BANTA FE		W MEXICO 87501			
P II B			i.		
LAND OFFICE	Neoures e	00 41 1 0 11 40 5			
THANSPORTER OIL	REQUEST FOR ALLOWABLE AND				
OPENATOR	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
PADRATION OFFICE				30-025-	2537
Commonat	D- 1 0				
	Producers Inc.				
Address DIA R- 1116	18 Requell NM8	707_1			
Reason(s) for liling (Check proper bo	9 11 11 11 11 11 11 11 11 11 11 11 11 11	Other (Please	/1	· · · · · · · · · · · · · · · · · · ·	
Reason(s) for filing (Check proper bo	Change in Transporter of:	Omer () rear	explains		
Recompletion YY	OII Dry G	:••			
Change in Ownership		ensale 🗍			
		THIS	WELL HAS BE	EN PLACED IN THE P	OOL
If change of ownership give name and address of previous owner		DESIG	NATED BELOV	W. IF YOU DO NOT CO	NCUE
	4.0	MOTI	Y THIS OFFIC	-	
DESCRIPTION OF WELL AND	LEASE 1 4685	7/1/92_	Kind of Lease	······································	Lease
Lease Name	SAN	SANMOL WOLFCAMP .		itate. Federal or Fee _	
Amoco State	1 Meljamar Cio	60	D.C.C., 1 Gat. C.	State	K-666
M 66	50 Feet From The South Li	Ine and 660	F F F	n Waat	
Unit Letter : UC	Feet From The SOUTH LI	ine and OUU	Feet From 7	rh• <u>West</u>	
Line of Section 28 T.	waship 16S Range	33E , NMPM	Lea		Cou
					, , , , , , , , , , , , , , , , , , ,
	CTER OF OIL AND NATURAL G				
Name of Authorized Transporter of Of	or Condensate	Address (Give address	to which approv	ed copy of this form is t	obe sent)
Amoco Production Repeline ITA		P.O. Box 591, Tulsa, OK 74102			
Name of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent)			
Conoco Inc	Unit Sec. Twp. Rge.	P.O. Box 1267			
If well produces oil or liquids, give location of tanks.	M 28 16S 33E	1	1	March 1977	
A	<u> </u>			March 13//	
f this production is commingled w COMPLETION DATA	ith that from any other lease or pool,	, give commingling order	number:		
	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	rv. Diff. 5
Designate Type of Completi	ion – (X)	1	<u> </u>		<u> </u>
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	
10-31-76	10-08-91	13,635		11,400	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	
4218 D.F.	Cisco	10,772		13,364 Depth Casing Shoe	
Perforations	00 1 1 40 700 40 700			1 -	
11,500 11,509 16.43 hol	es 32 holes 10,730 10,736	6 10,763 10,772 3 D CEMENTING RECOR	8 <mark>0.43_hole</mark>	s 11,536	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEM	ENT
		<u> </u>		i	
TEST DATA AND REQUEST F		after recovery of total volume		and must be equal to or e	sceed top:
OIL WELL		epsh or be for full 24 hours			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow		i, eic./	
10-8-91 Length of Test /	Tubing Pressure	Pumping (hea	ter_pl)	Choke Size	
48 hrs. 124					
Actual Prod. During Test	Dumping OII-Bbis.	pumping (hea	ter pl)	Gas-MCF	
31 bbls.	31-0.1 / 15.5	2 bbls of wate	n nd	36_MCE	
		L DUIS UL MALE	it //UL		
AS WELL	<u> </u>				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		Gravity of Condensate	
				L	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-	1n)	Choke Size	
	<u> 1</u>	<u> </u>			
ERTIFICATE OF COMPLIANC	CE	DIL CO	NSERVATI	ON DIVISION	
		400000450	MAR 13	aj	10
hereby certify that the rules and regulations of the Oll Conservation wision have been complied with and that the information given		APPROVED MAR 1 3 32 19			
• • • • • • •	best of my knowledge and belief.	BYORIG	NAL SIGNED	DY WALE TEXTON	
		ORIGINAL SIGNED BY LEADY SEXTON DISTRICT I SUPERVISOR			
\uparrow		11111			
\mathcal{L}				mpliance with mul. E	
felle spessing		If this is a request for allowable for a newly drilled or deep- well, this form must be accompanied by a tabulation of the devic			
Production	Plerk	tests taken on the w	ell in accord	ance with MULE 111	•
(Title)		All sections of this form must be filled out completely for all			

Fill out only Sections I. II. III. and VI for changes of own-well name or number, or transporter, or other such thangs of condict

Separate Forms C-104 must be filed for each pool in multi-completed wells.

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OCD HOBBS OFFICE

W MEXICO OIL CONSERVATION COMMIS

WELL LOCATION AND ACREAGE DEDICATION PLAT Effective 1-1-65 All distances must be from the outer boundaries of the Section. Well No. Operator Amoco State 1 Western Oil Producers Inc. Section Township Range County Unit Letter 16 South 33 East 28 Lea Actual Footage Location of Well: 660 West South 660 feet from the line and line Ground Level Elev: Producing Formation Dedicated Acreage: 4218.2 40 subject well by colored pencil or hachure marks on the plat below. 1. Outline the acreage dedicated to the 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty). 3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling. etc? If answer is "yes," type of consolidation _ If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission. CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Terry Bussey Production Clerk Position <u>Western Oil Producers</u> Company February 26, 1992 I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief. January 6,1977

660

2310

2000

1500

1000

Date Surveyed

and/or Land Surveyor

676 Certificate No.

John West Registered Professional Engineer

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