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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 1-1-63

NOV 19 1981

Operator Amoco Production Company	
Address P. O. Box 68, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Specify)
New Well <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"/>
Recompletion <input checked="" type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL

IF YOU DO NOT CONCUR
PLEASE SIGN HERE

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bondurant Federal	Well No. 5	Pool Name, including Formation West Tonto Wolfcamp	Kind of Lease State, Federal or Free Federal	Lease No. NM-01235-b
Location Unit Letter J 1980 Feet From The South Line and 1980 Feet From The East Line of Section 12 Township 19-S Range 32-E , NMFM, Lea 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"/> The Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, TX	
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 J	Sec. 12
	Twp. 19	Rge. 32

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 <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input checked="" type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 3-18-79	Date Compl. Ready to Prod. 10-13-81		Total Depth 13689		F.B.T.D. 12950			
Elevations (DF, RKE, RT, GR, etc.) 3674.5 RDB	Name of Producing Formation West Tonto Wolfcamp		Top Oil/Gas Pay 10887		Tubing Depth 10832			
Perforations 10,887-10,926					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-3/8	48#	445'	450 SX Cl C
9-5/8	36#	5002'	2300 SX Howco Lt; 200 SX Cl C
5-1/2	17#, 20#	13688'	1800 SX Trinity Lt; 780 SX Cl C

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 10-9-81	Date of Test 10-13-81	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 19	Oil-Bbls. 14	Water-Bbls. 5	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

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.

Mark Randolph
(Signature)
Assist. Admin. Analyst
(Title)
11-11-81
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 19 1981, 19

BY Orig. Signed by
Les Clements
TITLE Oil & Gas Insp.

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.