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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-11  
Effective 1-1-65

Operator Amoco Production Company	
Address P. O. Box 68, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input 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"/>
To show gas connection date	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State HR	Well No. 1	Pool Name, Including Formation Und. Airstrip Wolfcamp	Kind of Lease State, Federal or Fee	Lease No. L-4883
Location				
Unit Letter C	330	Feet From The North	Line and 1980	Feet From The West
Line of Section 36	Township 18-S	Range 34-E	N.M.P.M. 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Amoco Production Company, Trucks	P. O. Box 1183, Houston, TX 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Western Petroleum Corp.	P. O. Box 1689, Lovington, NM 88260					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 36	Twp. 18	Rge. 34	Is gas actually connected? Yes	When 1-9-81

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	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded 11-18-79	Date Compl. Ready to Prod. 1-5-81	Total Depth 10975'	P.B.T.D. 10862'					
Elevations (DF, RKB, RT, GR, etc.) 3965.8' GL	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 10712'	Tubing Depth 10850'					
Perforations 10712'-10812'	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	300'	325 Class C					
12-1/4"	9-5/8"	4000'	1835 Lite, 200 Class C					
8-3/4"	5-1/2"	10975'	1700 Lite, 900 Class H					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lost 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 1-5-81	Date of Test 1-5-81	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hr.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 134	Oil-Bbls. 132	Water-Bbls. 2	Gas-MCF 295

GAS WELL

Annual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE 0+4-NMOCD, H  
1-Hou 1-LBG 1-Susp 1-W. Stafford, Hou

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.

1-Pacific Lighting 1-Southland Royalty  
1-Bass 1-Mesa 1-Superior

Assist. Admin. Analyst

(Title)

4-9-81

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY \_\_\_\_\_

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 multiple completed wells.