

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format OG-01-83
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PRODUCTION OFFICE	

I. **Owner**
Amoco Production Company

Address
P.O. Box 68, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

☒ New Well	Change in Transporter of:	☐ Oil	☐ Dry Gas
☐ Recompletion	☐ Casinghead Gas	☐ Condensate	
☐ Change in Ownership			

Other (Please explain)
Request allowable

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>South Hobbs (GSA) Unit</u>	Well No. <u>197</u>	Pool Name, including Formation <u>Hobbs GSA</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location <u>SH/BHL</u>				
Unit Letter <u>L</u>	Feet From The <u>2030/2609</u>	South	Line and <u>860/740</u>	Feet From The <u>West</u>
Line of Section <u>34</u>	Township <u>18-S</u>	Range <u>38-E</u>	N.M.P.M. <u>Lea</u>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ <u>Shell Pipeline Company</u>	or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1008, Hobbs, NM 88240</u>
Name of Authorized Transporter of Casinghead Gas ☐ <u>Phillips Petroleum Company</u>	or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent) <u>GPM Gas Corporation 4001 Penbrook, Dallas, TX 75241</u>
If well produces oil or liquid, give location of tanks.	Unit <u>L</u>	Sec. <u>34</u>
Range <u>18-S</u>	Line <u>38-E</u>	Is gas actually connected? <u>yes</u>
Effective Date <u>12-7-85</u>		

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Charles M. Herring
(Signature)
Administrative Analyst (SG)
(Title)
12/11/85
(Date)

OIL CONSERVATION DIVISION
APPROVED DEC 12 1985
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR
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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well	Gas well	New well	Workover	Deepen	Plug back	Same near by	Drill. Area
		X		X					
Date Spudded OC 11-17-85	Date Compl. Ready to Prod. 12-10-85	Total Depth 4378'		P.S.T.D. 4355'					
Elevations (DF, RKB, RT, GR, etc.) 3625.2' GR	Name of Producing Formation Hobbs GSA	Top Oil/Gas Pay 4072'		Tubing Depth 4046'					
Perforations 4072-78', 4087-4110'							Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
26"	16" conductor		40'		RediMix				
14 3/4"	10 3/4" 40.5#		1535'		13005x Class C				
9 7/8"	7" 23#		4378'		13505x CLASS 1 STRESS I				

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 12-7-85	Date of Test 12-10-85	Producing Method (flow, pump, gas lift, etc.) Downhole Electric Pump	
Length of Test 24 hrs	Testing Procedure N/A	Casing Pressure N/A	Choke Size N/A
Actual Pric. During Test 2580	Oil - Bbls. 954	Water - Bbls. 1626	Gas - MCF 356

GAS WELL

Actual Pric. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Gauge - lb)	Casing Pressure (Gauge - lb)	Choke Size

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