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

I. Operator

Amoco Production Company

Address

BOX 68, HOBBS, N. M. 88240

Reason for filing (Please explain) EFFECTIVE 10-1-71

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Change in Ownership ☐ Casinghead Gas ☒ Condensate ☐

FORMERLY: SKELLY OIL CO

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name: STATE E TR. 18 21 | Well No.: 1 | Pool Name, Including Formation: LOVINGTON ABO | Kind of Lease: State, Federal or Fee: STATE | Lease No.: B-1553

Unit Letter: B | 660 Feet From The NORTH Line and 1650 Feet From The EAST

Line of Section: 1 | Township: 17-S | Range: 36-E | NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate ☒: TEXAS-NEW MEXICO PIPE LINE CO | Address (Give address to which approved copy of this form is to be sent): BOX 1510, MIDLAND, TEXAS

Name of Authorized Transporter of Casinghead Gas or Dry Gas ☒: PHILLIPS PETRO CO | Address (Give address to which approved copy of this form is to be sent): BARTLESVILLE, OKLA

If well produces oil or liquids, give location of tanks: Unit C | Sec. 1 | Twp. 17 | Rge. 36 | Is gas actually connected? YES | When

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth

Perforations	Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)

Length of Test	Tubing Pressure	Casing Pressure	Choke Size

Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

Testing Method (pitot, back pr.)	Casing Pressure (Shut-in)	Choke Size

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.

AREA SUPERINTENDENT

OCT 14 1971

OIL CONSERVATION COMMISSION

APPROVED OCT 19 1971, 19

BY Orig. Signed by Joe D. Ramey

TITLE Dist. I, Supv.

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.