NO. OF COPIES REC	LIVED	i	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	<u> </u>	
	GAS		
OPERATOR			
PRORATION OFFICE			

Production Manager

January 4, 1982

(Title)

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104	
Supersedes Old C-104 and	C-110
Effective 1-1-65	

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11		
	FILE		AND	Effective 1-1-65		
	U.\$.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATU	RAL GAS		
	LAND OFFICE					
	TRANSPORTER OIL		•	Comment Comment		
	GAS			<u>शिक्ष</u> विश्वासी		
	PRORATION OFFICE					
1.						
	Aminoil USA, Inc.					
	Address			U.S. GEOLOGICAS		
	P. O. Box 10525, Midl. Reason(s) for filing (Check proper box)		Other (Please explai	- COLUMNO.		
	New Well	Change in Transporter of:	Nation and	MEXICO .		
	Recompletion	Oil Dry Ga	s Notification	of gas connection and date		
	Change in Ownership	Casinghead Gas Conden	sate			
	If change of ownership give name and address of previous owner					
		LEASE R-6890 1	(2-1-82)			
H.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	,	of Lease No.		
		1 Gem Morrow		Federal 073240		
	Federal 30	1 Gem Hollow		rederal 0/3240		
		Feet From The South Lin	e and 760 Fee	From The East		
	Unit Letter;;	reet from the <u>bodeti</u>				
	Line of Section 30 Tow	mship 19-S Range 3	3-Е , ММРМ,	Lea County		
		or or and named at GA	•			
III.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to whic	h approved copy of this form is to be sent)		
	Koch Oil Co.		P. O. Box 3609, Mi			
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas X	Address (Give address to whic	h approved copy of this form is to be sent)		
	El Paso Natural Gas C		P. O. Box 1492, E1	Paso, Texas 79978		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When		
	give location of tanks.	I 30 19-S 33-E	Yes	12/31/81		
	If this production is commingled wit	h that from any other lease or pool,	give commingling order numb	er:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Dee			
	Designate Type of Completio	n (Y)	1 1	pen Prag Buck Same New Y.		
	Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.		
	6/19/81	9/21/81	13,712'	13,670'		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	3585.6 GR	Morrow	12,916'	13.173'		
	Perforations			Depth Casing Shoe		
	13,244'-13,582'			13,712'		
		1	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	17 1/2"	13 3/8"	1276'	975 sx Class "C" 3440 sx Hal. Lite		
	12 1/4"	9 5/8"	5310'	2150 sx Hal. Lite		
	8 3/4"	5 1/2"	13,712' 13,173	2130 SX Har. Hite		
		2 7/8"		oad oil and must be equal to or exceed top allow-		
V.	TEST DATA AND REQUEST FO	able for this de	pth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump	, gas lift, etc.)		
			Casing Pressure	Choke Size		
	Length of Test	Tubing Pressure	Costud bressma			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF		
	Actual Piba: Dailing 100.					
	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	9974 Testing Method (pitot, back pr.)	1/2 hr. Tubing Pressure(shut-in)	28.42 Casing Pressure (Shut-in)	53.8 @ 60° F		
	Testing Method (pitot, back pr.)		Casing Pressure (Snut-11)	25/64"		
	back pr.	4575				
VI.	CERTIFICATE OF COMPLIANO	CE		ERVATION COMMISSION		
			APPROVED JAN 15 1982			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			Orion Staned by			
	shove is true and complete to the best of my knowledge and belief.		BY Jerry Section			
			TITLE Diex 1, Sugre.			
	16-		This form is to be filed in compliance with RULE 1104.			
	Wilcemer.	ス	reading to a request for atlowable for a newly drilled or deepened			
	(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	Dundantian Manager	1	tests taken on the well i	G SCCOMMENCA ATTE MAPE 1114		

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.