## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION		
SANTA PE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER OIL		
	_DA5	
OPERATOR		
PROHATION OFFICE		

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE

OPERATOR	AND	
AUTHORIZATION TO TI	RANSPORT OIL AND NATURAL GAS	
l.		
AMOCO PRODUCTION COMPANY		
Address		
P. O. Box 68, Hobbs, NM 88240		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter of:	Request allowable to produce	
Recompletion Oil	Dry Gas	
Change in Ownership Casinghead Gas	Condensate	
If change of ownership give name and address of previous owner		
II. DESCRIPTION OF WELL AND LEASE		
Leque Name  Well No. Pool Name, Inclu	iding Formation Kind of Lease No.	
South Hobbs (GSA)Unit 139 Hobbs G	SSA State, Federal or Fee Fee	
Location	Line and 1941/2431 Feet From The West	
Line of Section 3 Township 19-S Rand	ge 38-E , NMPM, Lea County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NAT	Address (Give address to which approved copy of this form is to be sent)	
Shell Pipeline Company  Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas [	P. O. Box 1008, Hobbs, NM 88240  Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company GPM Gas Corpore	ment of February 1, 1992 mon TX 79761	
Unit Sec. Twp. R	qe. is gas actually connected? When	
If well produces oil or liquids, give location of tanks.  F 3 19-S 3	38-E Yes : 1-24-84	
If this production is commingled with that from any other lease or		
NOTE: Complete Parts IV and V on reverse side if necessary	•	
VI. CERTIFICATE OF COMPLIANCE	OIL CPRESERYATION	
I hereby certify that the rules and regulations of the Oil Conservation Divisio	n have APPROVED, 19	
been complied with and that the information given is true and complete to the	Eddie W. Seay	
my knowledge and belief.	Oil & Gas Inspector	
	TITLE Of & Ods Hispecial	
11 21	This form is to be filed in compliance with RULE 1104.	
(athus Forman	If this is a request for allowable for a newly drilled or deepened	
Assist. Admin. Analyst	well, this form must be accompanied by a tabulation of the deviation that taken on the well in accordance with AULE 111.	
(T/I)	All sections of this form must be filled out completely for allow-	

able on new and recompleted wells.

completed 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

(Date) 0+5-NMOCD,H 1-R. E. Ogden, HOU 1-CLF 1-F. J. Nash, HOU 1-Petro Lewis 1-Sun 1-Shell 1-Texaco

(Title)

2-7-84

IV. COMPLETION DATA
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on - (X)   X   Gas Well	New Mell Motronet De	epen Plug Back Same Res'v. Diff. Res'v.
Date Compl. Ready to Prod. 1-24-84	Total Depth 4437	P.B.T.D. 4397 '
Name of Producing Formation GSA	Top Oil/Gas Pay 4277	Tubing Depth 4219'
		Depth Casing Shoe 4441
TUBING, CASING, A	ND CEMENTING RECORD	
8-5/8" 5-1/2" 2-3/8"	1649' 4441' 4219'	SACKS CEMENT 900 CT C W/1% CACL 850 CT C W/add.
	Date Compl. Ready to Prod.  1-24-84  Name of Producing Formation GSA  4307'-09', 11'-13', 28  TUBING, CASING, A CASING & TUBING SIZE  8-5/8"  5-1/2"	Date Compl. Ready to Prod.  1-24-84  Name of Producing Formation GSA  4307'-09', 11'-13', 28'-39' and 44'-48'  TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE  DEPTH SET  8-5/8"  1649' 5-1/2"  4441'

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 12-9-83 Length of Test	Date of Test  1-24-84 Tubing Pressure	Producing Mathod (Flow, pump, gas lift, etc.)  DUMD	
24 hours Actual Prod. During Test		60 psi	Choke Size
43BO, 341BW, 34 MCFD	011-Bb1s. 43	Water-Bbls.	Gqe-MCF 34

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)	Cosing Pressure (Shut-in)	Choke Size
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