

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator AMOCO PRODUCTION COMPANY	
Address P. O. Box 68, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Request allowable to produce
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name South Hobbs (GSA) Unit	Well No. 144	Pool Name, including Formation Hobbs GSA	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location SL/BHL M/N 580/1316 Feet From The South Line and 755/1337 Feet From The West					
Line of Section 3 Township 19-S Range 38-E, NMPM, 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"/> Shell Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1008, Hobbs, NM 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 001 Penbrook, Odessa, TX 79761					
If well produces oil or liquids, give location of tanks.	Unit M/N	Sec. 3	Twp. 19-S	Rgs. 38-E	Is gas actually connected? Yes	When 12-20-83

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.

*Cathy L. Ferman*  
(Signature)

Assist. Admin. Analyst

(Title)

1-5-83

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

OIL CONSERVATION DIVISION

APPROVED JAN 11 1984, 19

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 Res'v.	Diff. Res'v.
		X		X					
Date Spudded 9-12-83	Date Compl. Ready to Prod. 12-20-83	Total Depth 4486'		P.B.T.D. 4460'					
Elevations (DF, RKB, RT, GR, etc.) 3609.6' GL	Name of Producing Formation GSA	Top Oil/Gas Pay 4300'		Tubing Depth 4204'					
Perforations 4300'-04', 06'-08', 12'-14', 20'-26', 36'-42', 50'-52', 56'-59', 63'-66', 68'-72', 92'-94', 4394'-4404' and 08'-16', w/4 SPF							Depth Casing Shoe 4486'		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"		8-5/8"		1582'		1000 C1 C w/add.			
7-7/8"		5-1/2"		4486'		50 bbl POZ-Mix, 1285 C1 H neat, 450 C1 H			
		2-7/8"		4204'					

#### 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 11-15-83	Date of Test 12-20-83	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 22B0, 414BW, 3 MCFD	Oil-Bbls. 22	Water-Bbls. 414	Gas-MCF 3

#### GAS WELL

Actual 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

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