

NAME OF OPERATOR	
DISTRIBUTION	
DATE MADE	
FILE	
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	
PRODUCTION OFFICE	

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 63, MOSBES, N. M. 88240

Reason for change (check proper box)

New Well

Change in Transporter of:

Reason for change

Oil

Dry Gas

Change in ownership

Casinghead Gas

Condensate

Other (Please explain)

If change of ownership give name  
and address of previous owner

II. IDENTIFICATION OF WELL AND LEASE

Well Name, including Formation  
CORRIGAN 2 PADDOCK- Kind of Lease Fee Lease No.

Location  
Unit Letter I 1980 Feet From The South Line and 660 Feet From The EAST

Section 33 Township 21-S Range 37-E, NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Transporter of Oil or Condensate SHELL PIPE LINE Co. Address (Give address to which approved copy of this form is to be sent) Box 1910 MIDLAND TEXAS  
Transporter of Casinghead Gas or Dry Gas SKELLY OIL Co. Address (Give address to which approved copy of this form is to be sent) Box 1650 TULSA, OKLAHOMA  
If well produces oil or liquids, give location of tanks. Unit I Sec. 33 Twp. 21 Rge. 37 Is gas actually connected? Yes When 7-16-71

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 X Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v. X  
Date 7-15-71 Date Compl. Ready to Prod. 7-14-71 Total Depth 7452' P.B.T.D. 6600  
Length of Test 3449 G.L. Name of Producing Formation PADDOCK Top Oil/Gas Pay 5113 Tubing Depth 5205  
Perforations 5113-5201 Various intervals. Depth Casing Shoe 7452

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	298'	280 Circ
12 1/4"	9 5/8"	2853'	1500 3x
8 3/4"	7"	7452'	550 SX

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 7-15-71 Date of Test 7-16-71 Producing Method (Flow, pump, gas lift, etc.) Flow  
Length of Test 24 Tubing Pressure 250 Casing Pressure 175 Choke Size 24/64  
Actual Prod. During Test 65 Oil-Bbls. 17 Water-Bbls. 48 Gas-MCF 768

GAS ANAL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

(Signature)

AREA SUPERINTENDENT

(Title)

JUL 16 1971

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 19 1971, 19

BY

TITLE SUPERVISOR, DISTRICT I

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.

RECEIVED

JUL 10 1971

OIL CONSERVATION COMM.  
HOBBS, N. M.