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LAND OFFICE	
TRANSPORTER OIL	
TRANSPORTER GAS	
OPERATOR	
PRORATION 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-...
Effective 1-1-65

(DEVIATION SURVEYS - ATTACHED)

I.

Operator: AMOCO PRODUCTION COMPANY

Address: BOX 367, ANDREWS, TEXAS 79714

Reason(s) for filing (Check proper box)
- New Well: X
- Recompletion:
- Change in Ownership:
- Change in Transporter of: Oil, Dry Gas, Casinghead Gas, Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
GILLULY 'B' FED R/AB	15	EUMONT-GAS	FED	LC-031736(C)

Location: Unit Letter ~~I~~ G ~~1980~~ 1980 Feet From The NORTH Line and 660 Feet From The EAST

Line of Section 33 Township 20-S Range 37-E, NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate — Address (Give address to which approved copy of this form is to be sent)

Name of Authorized Transporter of Casinghead Gas or Dry Gas X — Address (Give address to which approved copy of this form is to be sent)

NORTHERN NATURAL GAS CO. — BOX 2300, MIDLAND TX

If well produces oil or liquids, give location of tanks. Unit — Sec. — Twp. — Rge. — Is gas actually connected? No — 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.
		X	X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12-13-74	1-9-75	3760'	3714'

Elevations (DF, RKB, RT, GR, etc.)	Name of Prod. Form.	Top Oil/Gas Pay	Tubing Depth
3515' GL	QUEEN (PENROSE)	3521	3421'

Perforations	Depth Casing Shoe
3521, 22, 36, 40, 45, 46, 53, 55, 60, 61, 67, 69, 73, 74, 83, 88, 89, 3605, 06, 11, 25, 26, 30, 35, 39, 40.	3760'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17¼"	8 5/8"	357'	250
7⅞"	5 ½"	3760'	425
	2 3/8"	3421'	

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)

OIL WELL

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

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
500	24 HRS	—	—

Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
ORIFICE	TPF - 50	PKR	44/64

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.

Roy Yarbrough
ADMINISTRATIVE ASSISTANT
JAN 22 1975

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY _____

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 operator, 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.

OCC - NMOCC-H
1 - DIV
1 - SUSP
1 - RCH
1 - OGSP