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SANTA FE		
FILE	:	
U.S.G.S.		
LAND OFFICE		
IRANSPORTER GAS		
OPERATOR		
PRORATION OFFICE		
Amoco Production	Comp	oar
P. O. Box 68, Hot	obs,	Ne
Reason(s) for filing (Check a	roper à	iux )
Recompletion Change in Ownership		

9-10-82 (Date)

## NEW MEXICO OIL CONSERVATION COMMISSION

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1. Eliective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRA	AND INSPORT OIL AND NATURAL (	
	LAND OFFICE	AOTHORIZATION TO TRA	MADI CRIT SIE AND NATURAL (	JAJ
	TRANSPORTER   OIL   GAS			
	OPERATOR			
1.	PRORATION OFFICE			
	Amoco Production Compa	ny	·····	
	P. O. Box 68, Hobbs, No			
	Reasons) for filing (Check proper box, New Well X Recompletion	Change in Transporter of: Oil Dry Ga	allowable	000 barrel testing for Atoka Zone
	Change in Ownership	Castnghead Gas Cender	isde	
	If change of ownership give name and address of previous owner			
iI.	DESCRIPTION OF WELL AND	LEASE , Weil No.: Fool Mame, including F	ormation King of Leas	e   Legse No.
	El Alto Grande Unit	1-Y Wildcat Atok		nicrFee Federal NM-17441
	Unit Letter	O Feet From The North Lin	e andFeet From	The
	Line of Section 19 Tov	washio 22-S Range	34-E , NMPM, Lea	County
III.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	Address (Give address to which appro	wed copy of this farm to to be seed
	Permian Corporation	or Condensate	P. O. Box 1183, Houst	
	Name or Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which appro	wed copy of this form is to be sent)
		Unit Sec. Twp. Age	Is gas actually connected? Wh	en
	If well produces oil or liquids, give location of tanks.	F 19 22-S 34-E	NO	
ïV.	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	<del></del>	
	Designate Type of Completic	$\operatorname{con} = (X)$   Cil Weil   Gas Weil	New Well Workover Deepen	Plug Back   Same Resty, Diff. Resty,
	Date Spudged	Date Compl. Reacy to Proa.	Total Cepth	F.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.,	Name of Froducing Formation	Top Oil/Gas Pay	Tuoing Depth
	3461.8 GL	Atoka	12726	12621
	12726-63	2 JSPF		Depth Casing Shoe
	HOLE SIZE	TUBING, CASING, AND	D CEMENTING RECORD  DEPTH SET	SACKS CEMENT
٧.	TEST DATA AND REQUEST FOOL WELL	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil oth or be for full 24 hours)	and must be equal to or exceed top allow-
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas la	ift, etc.)
	Length of Test	Tubing Freesure	Casing Pressure	Choka Size
	Actual Pred. During Test	Oil-Sp!s.	Water - Bbls.	Gas-MCF
	CAC BELL		1	
	GAS WELL Actual Fred. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Teating Method (pitot, sack pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-in)	Choke Size
¥I.	VI. CERTIFICATE OF COMPLIANCE		ii	ATION COMMISSION
		regulations of the Oil Conservation	APPROVED SEP 14	982
	Commission have been complied a	with and that the information given best of my knowledge and belief.	OIL & GAS II	THE SECTION
	•		OIL & GAS II	ADIACO I OIL
	m/	1	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	
	- //ark	Meman		
	* (Sign	alwe) Analyst	tests taken on the well in acco	rdence with RULE 111.
	Assist. Admin.	.1	All sections of this form must be filled out completely for allowable on new and recompleted wells.	

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.

			_	
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SANTA FE	1			
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u.s.g.s.		1	_;	
LAND OFFICE				
TRANSPORTER	OIL	<u> </u>		
	GA5	i		
OPERATOR				
PRORATION OFFICE			_]	

	SANTA FE	i e	FOR ALLOWABLE	Form C-104 Supersedes Old C-164 and C-1
	FILE		AND	Effective 1-1-65
	LAND OFFICE	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	_ GAS
	OIL			
	TRANSPORTER GAS			
	OPERATOR			
ī.	PRORATION OFFICE	<u> </u>		
	Amoco Production	Company		
	Address	. N. M.: 00040		
	P. O. Box 68, Hot		(A)	
	Reason(s) for filling (Check proper box,	Change in Transporter of:	Other (Please explain) Request	allowable for spot sale
	Recompletion	Oil Dry Go	- 0 100	
	Change in Ownership	Castnghead Gas Conder	nsate	
	If change of ownership give name			
	and address of previous owner			
īI.	DESCRIPTION OF WELL AND	I FASF	•	
•••	Lease Name	Weil No., Fact Name, Including F		2
	El Alto Grande	1-Y Wildcat Devo	onian State, Fed	FederalNM-17441
	Location / F 10	980 Feet From The North Lin	20.90	West
	Unit Letter;;	Feet From The No. Cit Lir	ne and Feet Fro	om The
	Line of Section 19 Tov	vaship 22-S Range	34-E , NMPM,	Lea County
III.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	Address (Give address to which up	proved copy of this form is to be sent)
	Permian Corporation		P. O. Box 1183, House	
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas		proved copy of this form is to be sent)
	If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   F   19   22-S   34-E	Is gas actually connected?	When
		<del></del>		
ıv.	If this production is commingled wit COMPLETION DATA	in that from any other lease or pool,	give commingling order number:	
	Designate Type of Completic	Oil Weil Gas Weil	New Well Workover Deepen	Plug Back   Same Resty, Diff. Resty.
	Date Spudged	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.
	Date Spidded	Date Compil Aeday to Prod.	Total Depth	1.5.1.5.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Froducing Formation	Top Oil/Gas Pay	Tubing Depth
	3461.8 GL	Devonian	12726	13498
	Perforations Depth Casing Shoe			
	13631-73	TUBING CASING AN	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		1		
٧.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load	oil and must be equal to or exceed top allow
	OUL WELL	able for this de	pich or be for full 24 hours)  Producing Method (Flow, pump, ga	
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, go.	s ::jt, e:c.)
	Length of Test	Tubing Fressure	Casing Pressure	Choke Size
	Actual Pred. During Test	Oil-Ebla.	Water-Bbis.	Gas-MCF
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Teating Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Fressure (Shut-in)	Choke Size
2 · T	CERTIFICATE OF COMPLIANCE		OIL CONSED	VATION COMMISSION
₹1.	CERTIFICATE OF COMPLIAN	CE .	OIL CONSER	vation commission 1 5 1982
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED	19 1502
Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.		O II		
Alask reason			This form is to be filed in compliance with RULE 1104.	
	//////////////////////////////////////	me)	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	
	Assist. Admin.	Analyst	tests taken on the well in ac	cordence with RULE 111.
	7 12 00	(le)	able on new and recompleted	
	/-13-82		Fill out only Sections I	. II, III, and VI for changes of owner, porter, or other such change of condition
	(Da	ite)	Mert name or number, or transf	Antiental action amont energy of contention

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.