

APPLICATION FOR

SATISFACTION

FILE

DEVELOPER

LAND OFFICE

TRANSPORTER

OPERATOR

PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104

Superseding OIL C-101 and C-11

Effective 1-1-65

Operator

Amoco Production Company

Address

P. O. Box 68, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Casinghead Gas

Dry Gas

Condensate

Other (Please explain)

Deviation Report on Reverse Side

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name

State C Tr. 11

Well No.

11

Pool Name, including Formation

Hardy Blinebry

Kind of Lease

State, Federal or Fee State

Lease No.

F-218

Location

Unit Letter

X

510

Feet From The

South

Line and

560

Feet From The

East

Line of Section

2

Township

21-S

Range

36-E

N.M.P.M.

Lea

County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐

The Permian Corp.

Permian (Est. 9 / 1 / 1)

Address (Give address to which approved copy of this form is to be sent)

P. O. Box 1183 Houston, TX

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐

Getty Oil Co.

Address (Give address to which approved copy of this form is to be sent)

P.O Box 1231 Midland, TX

If well produces oil or liquids, give location of tanks.

Unit

X

Sec.

2

Twp.

21

Rce.

36

Is gas actually connected?

Yes

When

11-2-79

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)

Oil Well

X

Gas Well

New Well

X

Workover

Deepen

Plug Back

Same Res't.

Diff. Res't.

Date Spudded

8-25-79

Date Compl. Ready to Prod.

11-2-79

Total Depth

6900

P.B.T.D.

6884

Elevations (D.F., R.R.R., RT, GR, etc.)

3523.9 GL

Name of Producing Formation

Blinebry

Top Oil/Gas Pay

5800

Tubing Depth

Perforations

5800'-6178'

Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

17-1/2"

13-3/8"

1275'

850 sx CL. C

12-1/4"

9-5/8"

5060'

2300 sx Lite: 100 sx Thick set 100 sx Lite

8-3/4"

7"

4706'-6900'

400 sx CL. C

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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

11-2-79

Date of Test

11-28-79

Producing Method (flow, pump, gas lift, etc.)

Flow

Length of Test

24 hr.

Tubing Pressure

320#

Casing Pressure

Choke Size

18/64"

Actual Prod. During Test

208

Oil-Bbls.

107

Water-Bbls.

101

Gas-MCF

414

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MCF

Gravity of Condensate

Testing Method (pilot, back pr.)

Tubing Pressure (shut-in)

Casing Pressure (shut-in)

Choke Size

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.

O+4 NMCCD-H, 1-Hou, 1-Susp, 1-G. Ethridge, 1-BD

Assistant Administrative Analyst

12-5-79

OIL CONSERVATION COMMISSION

APPROVED

DEC 11 1979

BY

John W. Thompson

Cadence

TITLE

This form is to be filed in compliance with RULE 1104.

If this well is put 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 well logs of this form must be filed out completely for allowable on new oil or gas wells.

Fill out only locations I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of condition.

Deviation Report

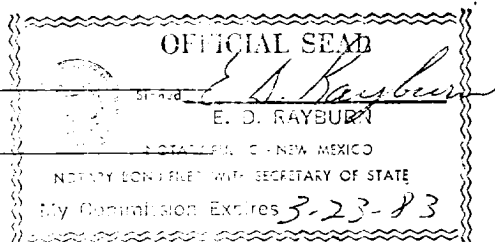
Depth (In Feet)	Deviation
474	1°
644	3/4°
923	3/4°
1275	1°
1750	1°
2225	1°
2666	1°
3161	1-1/4°
3659	1°
4131	1°
4580	3/4°
5060	1°
5542	1°
6038	1-1/4°
6537	1-1/4°
6900	1°

The above is true and correct to the best of my knowledge.

Dennis Evans
Assistant Administrative Analyst

Subscribed and Sworn to before me this 6th day of December, 1979
Notary Public in and for Lea County, New Mexico.

My Commission Expires _____



RECEIVED
DEC 11 1979
LEA COUNTY, NEW MEXICO