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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISS
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

1. Operator
AMOCO PRODUCTION COMPANY.

Address
BOX 68, HOBBS, N. M. 88240

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☒
Change in Ownership ☐
Change in Transporter of:
Oil ☐
Casinghead Gas ☐

Other (Please explain)

REQUEST 1000 BBL TESTING
ALLOWABLE DUAL W/ BLINEBRY

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name OWEN A	Well No. 2	Pool Name, Including Formation PENROSE SKELLY	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter F ; 1980 Feet From The NORTH Line and 1980 Feet From The WEST Line of Section 3 Township 22-S Range 37-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 PIPE LINE Co.	Address (Give address to which approved copy of this form is to be sent) MIDLAND TEXAS					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> SKELLY OIL Co	Address (Give address to which approved copy of this form is to be sent) EUNICE N. M.					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 3	Twp. 22	Rge. 37	Is gas actually connected? YES	When 2-5-71

If this production is commingled with that from any other lease or pool, give commingling order number: EFFECTIVE JANUARY 31, 1977,
SKELLY OIL COMPANY MERGED

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	INTO GRIFFIN OIL COMPANY	Refracture
Date Spudded OC 1-22-71	Date Compl. Ready to Prod. 1-23-71	Total Depth 6606	P.B.T.D. 6305				
Elevations (DF, RKB, RT, GR, etc.) 3402' GL	Name of Producing Formation GRAYBURG	Top Oil/Gas Pay 3662	Tubing Depth 3800				
Perforations 3662-64, 70-72, 94-96, 3707-12, 22-24, 36-44, 50-54, 60-64, 72-74, 78-84, 92-96 W/ 2 JS PF.			Depth Casing Shoe 6606				
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	13 3/8"	287	250				
	9 5/8"	2849	500				
	7"	6606	400 + 750 3846 + 1005x @ 3649'				

V. 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 1-23-71	Date of Test 2-5-71	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 61	Oil - Bbls. 58	Water - Bbls. 3	Gas - MCF NA

GAS WELL

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.

043 NMCCC-14
1- SUS D
1-BRY
1-OLP
1-JCL

(Signature)

AREA SUPERINTENDENT

(Title)

FEB 5 1971

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 8 1971, 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 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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FEB 1971

OIL CONSERVATION COMM.
HOBBES, N. H.