

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

DISTRIBUTION	
SALES OFFICE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

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)

To correct gas potential
from 0 to 98 MCF.

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Grizzell Deep	Well No. 1	Pool Name, including Formation Und. Blinebry	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter N ; 660 Feet From The South Line and 1980 Feet From The West Line of Section 5 Township 22-S Range 37-E , NMCM, Lea County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Shell Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1008, Hobbs, NM 88240			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Getty Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1137, Eunice, NM 88231			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 5	Twp. 22	Rge. 37
	Is gas actually connected?		When	
	Yes			

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

II. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
Date Spudded 12-29-79	Date Compl. Ready to Prod. 2-7-80		Total Depth 6565'		P.B.T.D. 6382'			
Elevations (DF, RKB, RT, GR, etc.) 3437 DF	Name of Producing Formation Blinebry		Top Oil/Gas Pay 5563'		Tubing Depth			
Perforations 5563'-6028'					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
Existing Casing not Altered			

III. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead 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	Date of Test 2-7-80	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 48	Oil - Bbls. 4	Water - Bbls. 44	Gas - MCF 98

GAS WELL

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

IV. 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.

0+4 NMCD-H, 1-Hou, 1-BD, 1-Susp, 1-G. Ethridge

Bob Davis
(Signature)

Assistant Administrative Analyst

(Title)

2-28-80

(Date)

OIL CONSERVATION COMMISSION

MAR 5 1980

APPROVED _____, 19 _____

BY _____

Orig. Signed by

Les Clements

TITLE _____

Oil & Gas Insp.

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

If this be a request for allowable for a newly drilled or deepened well, this form must be accompanied by a calculation 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 conditions.