

# AMENDED REPORT

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <b>AMOCO PRODUCTION COMPANY</b>		
Address <b>P. O. Box 68, Hobbs, New Mexico 88240</b>		
Reason(s) for filing (Check proper box)		Other (Please explain)
<input type="checkbox"/> New Well	Change in Transporter of:	Amend original C-104 approved 12-17-83 Adds 4-1/2" liner 4214'-11087'.
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

### II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Federal "CW" Com</b>	Well No. <b>1</b>	Pool Name, including Formation <b>Antelope Ridge Atoka</b>	Kind of Lease State, Federal or Fee <b>Federal</b>	Lease No. <b>NM 19143</b>
Location Unit Letter <b>P</b> : <b>660</b> Feet From The <b>South</b> Line and <b>990</b> Feet From The <b>East</b>				
Line of Section <b>3</b> Township <b>23-S</b> Range <b>34-E</b> , NMPM, <b>Lea</b> County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<b>Koch Oil Company</b>	<b>P. O. Box 1558 Breckenridge, TX</b>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<b>Phillips Petroleum Corporation</b>	<b>4001 Penbrook Odessa, TX 79761</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>P</b>	Sec. <b>3</b>
	Twp. <b>23-S</b>	Rge. <b>34-E</b>
	Is gas actually connected? <b>Yes</b> When <b>12-8-83</b>	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

### VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

OIL CONSERVATION DIVISION

**OCT 31 1984**

APPROVED **ORIGINAL SIGNED BY JERRY DIXON** 19  
BY **DISTRICT 1 SUPERVISOR**

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.

*Mary C. Clark*  
(Signature)  
Assist. Admin. Analyst

(Title)  
10-29-84

(Date)

O+5-NMOCD, H 1-JR. Barnett, HOU Rm. 21.156  
1-F.J. Nash, HOU Rm. 4.206 1-GCC

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X						
Date Spudded 1-26-83	Date Compl. Ready to Prod. 8-24-83	Total Depth 13538'			P.B.T.D. 12945'				
Elevations (DF, RKB, RT, GR, etc.) 3376.6' GR	Name of Producing Formation Atoka	Top Oil/Gas Pay 12004'			Tubing Depth 11888'				
Perforations 12004'-14', 12034'-94', 12252'-74', and 12284'-90' w/2 JSPF						Depth Casing Shoe 12990'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
26"	20"		1716'		10252' Class C				
17-1/2"	13-3/8"		3943'		3200 CT C, 200 Thixset				
12-1/4"	10-3/4"		5344'		650 Thixset, 700 Class C				
* See below									

#### 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)

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 61 BC, 1363 MCFD	Length of Test 24 hours	Bbls. Condensate/MMCF < 1	Gravity of Condensate
Testing Method (pilot, back pr.) flowing	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 19/64"

Hole Size	csg & Tbg size	Depth Set	Sacks cmt
9-1/2"	7-3/4"	11600	325 H POZ & 1700 CT H
6-1/2"	4-1/2"	11082'-12990'	555 sx Class H
6-1/2"	4-1/2"	11087'- 9214'	250 sx Class H
	2-7/8"	11888'	

OCT 30 1984

W. H. H. H. H.