

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-110
Effective 1-1-65

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

Amoco Production Company

BOX 68, HOBBS, N. M. 88240

Reason(s) for filing (check proper box)

New Well ☐
Re-completion ☒
Change in ownership ☐

Change in Transporter of:
Oil ☐
Casinghead Gas ☐

Dry Gas ☐
Condensate ☐

Other (Please explain)

RE-ENTER & RECOMPLETED.

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name STATE D	Well No. 2	Pool Name, Including Formation FOWLER-UPPER YESO	Kind of Lease State, Federal or Fee	Lease No. B 2616
Location Unit Letter P ; 660 Feet From The SOUTH Line and 510 Feet From The EAST Line of Section 16 Township 24-S Range 37-E , NMPM, LEA County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> THE PERMIAN CORP (TRUCKS)	Address (Give address to which approved copy of this form is to be sent) BOX 3119 MIDLAND TEXAS			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS Co.	Address (Give address to which approved copy of this form is to be sent) JAL N.M.			
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 16	Twp. 24	Rge. 37
	Is gas actually connected? YES		When 6-5-73	

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover <input checked="" type="checkbox"/>	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded OC 5-14-73	Date Compl. Ready to Prod. 6-4-73	Total Depth 10,755'	P.B.T.D. 5894'					
Elevation (DE, RKB, RT, GR, etc.) 3248 D.F.	Name of Producing Formation UPPER-YESO	Top Oil/Gas Pay 5315'	Tubing Depth 5650'					
Perforations 5315-19, 29, 34-38, 53-56, 68-73, 79-81, 91-95 5417-19, 31-37, 57, 92, 99-02, 5525-30, 57-61, 89-99, 5640-43 w/2ISPF		Depth Casing Shoe 5894'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
SEE ORIG RECORDS	13 3/8"	323'	Circ.					
	9 7/8"	775-3855'	2-STAGE (TCMT 775)					
	5 1/2"	5894'	910 Sx. + ADDS.					

IV. 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 6-4-73	Date of Test 6-5-73	Producing Method (Flow, pump, gas lift, etc.) PROD.	
Length of Test 24	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 206	Oil-Bbls. 157	Water-Bbls. 49 BLW	Gas-MCF 39

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

I. 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.

44-NMOCC-H

1-DIV
1-OBP
1-JEL
1-SUSP
1-RRY

Foreman
AREA SUPERINTENDENT
6-5-73
(Date)

OIL CONSERVATION COMMISSION

APPROVED 1973
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.