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U.S.G.S.			
LAND OFFICE		!	
TRANSPORTER	OIL	<u> </u>	
TRANSFORTER	GAS	İ.,_	
OPERATOR		14	
PRORATION OFFICE			

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE /	‡ RE(	QUEST FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
Ĺ	FILE	+	AND	
	u.s.g.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
1	LAND OFFICE			
[	TRANSPORTER OIL			<i>J</i> ·
	GAS			*
ľ	OPERATOR 1			
I.	PRORATION OFFICE			
•	Operator			
	Whigham Drilling Co.	. Inc.		
F	Address			
	P. O. Box 1439, Farm	ington. New Mexico		
-	Reason(s) for filing (Check proper box		Other (Please exp	lain)
1	New Well	Change in Transporter of:	:	
İ	- `· <del>                                   </del>	Oil	Dry Gas	
	Recompletion	Casinghead Gas	Condensate	1
	Change in Ownership	Casingheda Gas	Solidensate	
,	If change of ownership give name			
	and address of previous owner			
II.	DESCRIPTION OF WELL AND	LEASE		Kind of Lease
	Lease Name	1	Pool Name, Including Formation	
ŀ	CTV H ospah	2	Undesignated-Gallup	State, Federal or Fee
Ī	Location		Too pah.	
	Unit Letter ; 2310	Feet From The Nort	h Line and <b>2310</b> F	eet From The West
	omit Better,			
	Line of Section 12 , To	wnship 17 N Ro	ange 🤊 🕷 , NMPM, 🕽	County County
L	Eme of Section			
***	DESIGNATION OF TRANSPOR	TED OF OH AND NATH	RAL GAS	
111.	Name of Authorized Transporter of Oi	or Condensate	Address (Give address to wh	nich approved copy of this form is to be sent)
			P. O. Bear 1528, I	Parmington, New Mexico
	Lamar Trucking, Inc.	singhead Gas or Dry Gas		nich approved copy of this form is to be sent)
	Name of Authorized Transporter of Ca	singhedd Gds Or Dry Gds	, Ladress force some services	
			111111111111111111111111111111111111111	When
	If well produces oil or liquids,	Unit Sec. Twp.	Rge. Is gas actually connected?	when
	give location of tanks.	G 12 17N	9W	
	If this production is commingled w	ith that from any other lease	or pool, give commingling order nur	mber:
	COMPLETION DATA			
	D : T (Cl-ti		ns Well   New Well   Workover   D	Deepen Plug Back Same Restv. Diff. Restv.
	Designate Type of Completi	on = (A)	X	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	2_19_65	3-26-65	1637	1610
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Haspan	Hospah-Gallup	1558	1490.23
	ABBOATENEGOS	Hosbert amtra-b		Depth Casing Shoe
	Perforations			1
				• ·
	Perforations 1558-1596	TUDING CASI	INC. AND CEMENTING DECORD	1635
	1558-1596		ING, AND CEMENTING RECORD	1635
		TUBING, CASING & TUBING S	SIZE DEPTH SET	1635 SACKS CEMENT
	1558-1596	CASING & TUBING S	30.51	SACKS CEMENT
	1558-1596 HOLE SIZE 8 3/4	CASING & TUBING S	30.51 1635	1635 SACKS CEMENT
	1558-1596 HOLE SIZE	CASING & TUBING S	30.51	SACKS CEMENT
	1558-1596 HOLE SIZE 8 3/4	CASING & TUBING S	30.51 1635	SACKS CEMENT
V	1558-1596  HOLE SIZE  8 3/4  6 1/4	CASING & TUBING S 7*  4 1/2* 2 3/8*	30.51 1635 1490	1635 SACKS CEMENT 10 60
V.	1558-1596  HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST I	CASING & TUBING S 78 4 1/28 2 3/88  FOR ALLOWABLE (Test	30.51 1635 1490  must be after recovery of total volume of this depth or be for full 24 hours)	SACKS CEMENT 10 60 of load oil and must is sale allow-
V.	1558-1596  HOLE SIZE  8 3/4  6 1/4	CASING & TUBING S 78 4 1/28 2 3/88  FOR ALLOWABLE (Test	30.51 1635 1490  must be after recovery of total volume of	SACKS CEMENT 10 60 of load oil and must is sale allow-
v.	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL  Date First New Cil Run To Tanks	CASING & TUBING S 78 4 1/28 2 3/88  FOR ALLOWABLE (Test able)	30.51 1635 1490  must be after recovery of total volume of this depth or be for full 24 hours)	SACKS CEMENT  10  60  of load oil and must be Allest area D allow- timp, gas lift, etc.)  MAR 29 1965
V.	1558-1596  HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL	CASING & TUBING S 7 4 1/2 2 3/8  FOR ALLOWABLE (Test able)	30.51 1635 1490  must be after recovery of total volume of this depth or be for full 24 hours)  Producing Method (Flow, pu	SACKS CEMENT  10  60  of load oil and must be Allest area D allow- timp, gas lift, etc.)  MAR 29 1965
V.	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL  Date First New Oil Run To Tanks  3-26-65 Length of Test	CASING & TUBING S 78 4 1/28 2 3/88  FOR ALLOWABLE (Test able ) Date of Test 3-26-65	must be after recovery of total volume of for this depth or be for full 24 hours)  Producing Method (Flow, pu	SACKS CEMENT  10 60 of load oil and must be called allow- timp, gas lift, etc.) MAR 29 1965 Choke Szoil CON. COM.
V.	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL Date First New Cil Run To Tanks 3-26-65 Length of Test	CASING & TUBING S 78 4 1/28 2 3/88  FOR ALLOWABLE (Test able) Date of Test 3-26-65 Tubing Pressure	must be after recovery of total volume of for this depth or be for full 24 hours)  Producing Method (Flow, pu	SACKS CEMENT  10  60  of load oil and must be Allest area D allow- timp, gas lift, etc.)  MAR 29 1965
<b>v</b> .	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL  Date First New Cil Run To Tanks 3-26-65 Length of Test 6 hrs. Actual Prod. During Test	CASING & TUBING S  78  4 1/28 2 3/88  FOR ALLOWABLE (Test able )  Date of Test  3-26-65  Tubing Pressure  Oil-Bbls.	must be after recovery of total volume of for this depth or be for full 24 hours)  Producing Method (Flow, pu	SACKS CEMENT  10 60  of load oil and must is CALLEL TREAL allow- timp, gas lift, etc.)  Choke SzOIL CON. COM. DIST. 3
V.	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL Date First New Cil Run To Tanks 3-26-65 Length of Test	CASING & TUBING S 78 4 1/28 2 3/88  FOR ALLOWABLE (Test able) Date of Test 3-26-65 Tubing Pressure	must be after recovery of total volume of for this depth or be for full 24 hours)  Producing Method (Flow, pu	SACKS CEMENT  10 60  of load oil and must be extract wheel allow- timp, gas lift, etc.)  Choke SzOIL CON. COM. DIST. 3
V.	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL  Date First New Cil Run To Tanks  3-26-65 Length of Test 6 hrs. Actual Prod. During Test 144 Bbls	CASING & TUBING S  78  4 1/28 2 3/88  FOR ALLOWABLE (Test able )  Date of Test  3-26-65  Tubing Pressure  Oil-Bbls.	must be after recovery of total volume of for this depth or be for full 24 hours)  Producing Method (Flow, pu	SACKS CEMENT  10 60  of load oil and must is CALLEL TREAL allow- timp, gas lift, etc.)  Choke SzOIL CON. COM. DIST. 3
V.	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL  Date First New Cil Run To Tanks 3-26-65 Length of Test 6 hrs. Actual Prod. During Test 144 Bbls  GAS WELL	CASING & TUBING S  7  A 1/2* 2 3/8*  FOR ALLOWABLE (Test able) Date of Test 3-26-65 Tubing Pressure  Oil-Bbls.	must be after recovery of total volume of for this depth or be for full 24 hours)  Producing Method (Flow, pu Syabbing Casing Pressure  Water-Bbls.	SACKS CEMENT  10 60  of load oil and must be ALLEGE LANGE Allow- timp, gas lift, etc.)  Choke SzOIL CON. COM. DIST. 3  Gas-MCF None
V.	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL  Date First New Cil Run To Tanks  3-26-65 Length of Test 6 hrs. Actual Prod. During Test 144 Bbls	CASING & TUBING S  78  4 1/28 2 3/88  FOR ALLOWABLE (Test able )  Date of Test  3-26-65  Tubing Pressure  Oil-Bbls.	must be after recovery of total volume of for this depth or be for full 24 hours)  Producing Method (Flow, pu	SACKS CEMENT  10 60  of load oil and must be Choke SzOIL CON. COM. DIST. 3
<b>V</b> .	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL  Date First New Cil Run To Tanks 3-26-65 Length of Test 6 hrs. Actual Prod. During Test 144 Bbls  GAS WELL	CASING & TUBING S  7  A 1/2* 2 3/8*  FOR ALLOWABLE (Test able) Date of Test 3-26-65 Tubing Pressure  Oil-Bbls.	must be after recovery of total volume of for this depth or be for full 24 hours)  Producing Method (Flow, pu Swabbing Casing Pressure  Water-Bbls.  None  Bbls. Condensate/MMCF	SACKS CEMENT  10 60 of load oil and must be active acted allow- timp, gas lift, etc.)  Choke SZOIL CON. COM. DIST. 3  Gas-MCF None  Gravity of Condensate
V.	HOLE SIZE  8 3/4 6 1/4  TEST DATA AND REQUEST FOIL WELL  Date First New Cil Run To Tanks 3-26-65 Length of Test 6 hrs. Actual Prod. During Test 144 Bbls  GAS WELL	CASING & TUBING S  7  A 1/2* 2 3/8*  FOR ALLOWABLE (Test able) Date of Test 3-26-65 Tubing Pressure  Oil-Bbls.	must be after recovery of total volume of for this depth or be for full 24 hours)  Producing Method (Flow, pu Syabbing Casing Pressure  Water-Bbls.	SACKS CEMENT  10 60  of load oil and must be ALLEGE LANGE Allow- timp, gas lift, etc.)  Choke SzOIL CON. COM. DIST. 3  Gas-MCF None

## 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.

A. W.	Try. Thomas gr	
- auc	(Signature)	
Pet	roleum Geologist	

(Title)

3-28-65 (Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 2 9 1965	, 19
BY A. R. KENDRICK	

TITLE PETROLEUM ENGINEER DIST. NO. 3

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 Sections I, II, III, and VI only 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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Job separation sheet

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## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

	U.S.G.S.  LAND OFFICE  TRANSPORTER GAS	AUTHORIZATION TO TRAN	AND NSPORT OIL AND NA		ctive 1-1-65
1.	OPERATOR / PRORATION OFFICE Operator Thomas G. Whig	rham			
ŀ	Address	<del></del>	•		·
	Reason(s) for filing (Check proper box)  New We!!  Recompletion	Change in Transporter of: Oil Dry Gas Casinghead Gas Condens	Other (Please ex	eplain)	
:	If change of ownership give name and address of previous owner	Thigham Drilling Co.	. Inc. Farmin	gton, New Mex	kico
II.	DESCRIPTION OF WELL AND L	Well No. Pool Name, Including Fo		ind of Lease	Lease No.
	CTV Hospah	2 Hospah - G	allup s	tate, Federal or Fee	NM 081208
	Unit Letter F; 2310	Feet From The N Line	and 2310	Feet From The	
	Line of Section 12 Town	nship 17% Range	9W , NMPM,	McKinley -	N. Mex. County
Ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S Address (Give address to	which approved come of th	is form is to be sent)
	Name of Authorized Transporter of Oil	or Condensate	P/O Box 2099	Houston, To	exas
	Shell Oil Co. Name of Authorized Transporter of Casi	inghead Gas or Dry Gas	Address (Give address to	which approved copy of th	is form is to be sent)
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected		
	If this production is commingled with COMPLETION DATA		give commingling order r	Deepen Plug Back	Same Resty. Diff. Resty.
	Designate Type of Completion	n - (X)   Oil Well   Gas Well	New well	1	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Dep	oth
	Perforations		Depth Casi	ng Shoe	
			CEMENTING RECORD		ACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		
			6	e of load oil and must	squel to or exceed top allow-
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours)  Producing Method (Flow,		WEN.
	Date First New Oil Run To Tanks	Date of Test	Producing Method (F tow,	/21 LL	ALL
	Length of Test	Tubing Pressure	Casing Pressure	ANG 2	A 1960
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	1 GG2 - MO.	M. Cor.
		<u> </u>	<u> </u>	D	ST. 3
	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 Siz	•
	Testing Method (pitot, buck pit)				NAMISSIONI
VI	. CERTIFICATE OF COMPLIAN	CE		ONSERVATION CO AUG 24 1966	10
	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.		BY Original	Signed by Eme	ry C. Arnold
	avote 12 tide and complete to the		TITLE	SUPERVISOR DIST	
\	1 Sill in from		- II-	be filed in compliance	newly drilled or despened
	(Sign	nature)	well, this form must	be accompanied by a veil in accordance with	RULE 111.
	Operator (Ti	itle)	Il able on new and rec	COMDistag Marra.	i out completely for allow-
	August 23, 1966	late)	" well name or number	. Of tigusporter of other	VI for changes of owner, such change of condition- for each pool in multiply