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U.S.M.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS
OPERATOR	1
PRODUCTION OFFICE	

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

I. Operator
Burwinkle & Scanlon & Husky Energy, Inc.

Address
124 Jackson, N.E., Albuquerque, New Mexico

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner **Burwinkle & Scanlon & Husky Energy, Inc.**

II. DESCRIPTION OF WELL AND LEASE

Lease Name OH Well	Well No. 8	Pool Name, including Formation Chaco Wash-Mesa Verde	Kind of Lease State, Federal or Fee State	Lease No. K-1883
Location Unit Letter C , 330 Feet From The N Line and 1980 Feet From The W				
Line of Section 28 Township 20N Range 9W , NMPM, McKinley 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"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) 100 Box 108 Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 28
	Twp. 20N	Rge. 9W
Is gas actually connected?		When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-27-68	Date Compl. Ready to Prod. 3-2-68		Total Depth 515		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 6432	Name of Producing Formation Mesa Verde		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 4 3/4	CASING & TUBING SIZE 2 3/8		DEPTH SET 492		SACKS CEMENT 50			

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	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	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.

(Signature)
President, Husky Energy Inc.
(Title)
11/3/71
(Date)

OIL CONSERVATION COMMISSION
NOV 3 1971

APPROVED _____, 19_____
BY **Original Signed by Emery C. Arnold**
TITLE **SUPERVISOR DIST #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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

