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| SANTA FE | | 1 | |
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| U.S.G.S. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | 1 | |
| | GAS | | |
| OPERATOR | | 2 | |
| PRORATION OFFICE | | | |
| <u> </u> | | | |

| | SANTA FE / NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND | | Form C-104 Supersedes Old C-104 and C-116 Effective 1-1-65 | | | |
|---|---|--|---|---|--|---------|
| | U.S.G.S. LAND OFFICE TRANSPORTER OIL / GAS OPERATOR | L GAS | | | | |
| 1. | PRORATION OFFICE | | | | | |
| | Operator Dome Petroleum Corp | oration | | | | |
| | Address &Minerals Mana | gement Inc., Suite | 105, | | | |
| | 501 Airport Drive, Reason(s) for filing (Check proper box) | | | | | |
| | | | | | | |
| | Recomplication Change of Ownership | Oil Dry Go Casinghead Gas Conde | | | | |
| | If change of ownership give name and address of previous owner | | | | | |
| II. | II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Navajo Lea | | | | | |
| | Navajo Allotted 15 | 3 Papers Wash | C1-1- F1- | deral or FeeAllotted N00-C- | | |
| | 1.5 | 10 Feet From The South Lin | | om The West 5377 | | |
| | Line of Section 15 Tov | wnship 19N Range | 5W , NMPM, MCKi | nley County | | |
| Ш. | DESIGNATION OF TRANSPORT | FER OF OIL AND NATURAL GA | Address (Give address to which as | pproved copy of this form is to be sent) | | |
| | Name of Authorized Transporter of Oil Permian Corporation | | Box 1183, Houston | | | |
| | Name of Authorized Transporter of Cas | singhead Gas or Dr. Gas | Address (Give address to which a | pproved copy of this form is to be sent) | | |
| | If well produces oil or liquids, | Unit Sec. Twp. Rge. | Is gas actually connected? | When | | |
| | give location of tanks. If this production is commingled with | th that from any other 1s ase or pool, | NO give commingling order number: | CONFIDENTIAL | | |
| IV. | COMPLETION DATA | Oil Well Gas Well | New Well Workover Deepen | | | |
| | Designate Type of Completic | Date Compl. Ready to Prod. | X Total Depth | P.B.T.D. | | |
| | 2-28-77 | 3-26-77 | 5343' | 5295 ' | | |
| | Elevations (DF, RKB, RT, GR, etc.) 6562'GR, 6574'KB | Name of Producing Formation Entrada | Top Oil/Gas Pay 5142' | Tubing Depth 3004 Depth Casing Shoe | | |
| | Perforations 5142'-5148' | ertorations | | | | |
| | | TUBING, CASING, AN | D CEMENTING RECORD | | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET 204' | SACKS CEMENT 200 | | |
| | 15" 8 3/4" | 10 3/4" 40.5# 7" 23 # | 53421 | 900 (2 stages) | | |
| | 0 3/ 1 | 2 7/8" 6.5# | 3004' | | | |
| •• | THE DAME AND DECLICATED | OP ALLOWARIE (Care must be | ofter recovery of total volume of load | oil and must be equal to or exceed top allow- | | |
| V. | V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL OIL First New Oil Bun To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) | | | | | |
| | Date First New Oil Run To Tanks | Date of Test | Pumping Pumping | | | |
| | 3-27-77 Length of Test | 3-28-77 Tubing Pressure | Casing Pressure | Cheke Size | | |
| | 24 hours | | | Gas-MGF (2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2. | | |
| | Actual Prod. During Test 380 bb1. | On-Bbls. 380 | Water - Bbls. | \O TSTM | | |
| | 300 DD1. | | | DIST. 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 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. | | CE | OIL CONSER | RVATION COMMISSION | | |
| | | BY PETROLES ROSE, NO. 5 | | | | |
| | | | | | | SA SULL |
| | This form is to be filed in compliance with RULE 1104. | | | | | |
| | Aroa Managor Asia | atwe) | 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 | | | |
| | Area Manager (Signature) Minerals Management Inc. (Title) March 28, 1977 | | well, this form must be 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. | | | |
| | | | | | | |
| | | | | | | |

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.