PROY AND MILLERALS DEPAREMENT OIL CONSERVATION DIVISION P. O. HOX 2088 FIRST NITURE TO SANTA FE FIRST OF SANTA FE FIRST OF FIRST OF FIRST OF SANTA SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

THAMSPORTER	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS													
OPPRATOR			1	AUTH	IORIZA	TION	TO TRANS	SPORT OIL	AND NATUR	RAL GAS				
PAGRATION OPPICE														
Zenit	h E	nerg	y Cor	р.										
Box 1	038	Ki.	lgore,	Texa	s 75	662								
Reason(s) for fo									Other (Please	explain)				
Hem Mell	ָנַ בַּ	<u> </u>		Chang	e in Tro	ana porte	1							
Recompletion Oil Dry Gd														
Change in Own	ership	<u> </u>		Casin	gheod G	65	Conde	nsale []						
f change of overall and address of									·····					
DESCRIPTIO	N OF	WEL	L AND L	EASE										
Lease Name Well No. Pool Name, Including t									oznation Grue Kind of Lease				0-9725	
SRPRE				127	`		up no-	<u> </u>	Our				l	
Unit Letter_	I		1650	<u>0</u> Feel	From T	. <u>So</u>	uth_u	ne and <u>330</u>)	_ Feet From 1	rhe East	<u>t</u>		
Line of Sect	ion	20	Town	ship 16	SN		Range	6W	, ММРМ,	McKinl	ey		County	
								46						
DESIGNATIO	N OF	TRA:	SPORT	ER OF O	IL AN	D NA	TURAL GA	And eas /	Give address to	which approx	ed copy of th	is form is to	be sent)	
							_	1616 (lenarm:	Place. 80202_	suite .	1230		
Hane of Author	Ized T	TTIT	ng Co	nghead Gas	•	or Dry	Gas 🗀	Address (Give address to	which appros	ed copy of th	is form is to	be sent)	
,,-m. 2,	-	•												
If well produces oil or liquids, Unit Sec. Twp. Rge.								Is gas actually connected? When						
give location of				_A	29	<u>¦ 16</u>	<u>n:6w</u>	no						
f this producti	on is	commin	gled with	that from	any ot	her le	ase or pool,	give comm	ingling order	number:		 		
COMPLETIO	N DA	TA			1 OII W		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res	v. Diff. Res'v.	
Designate	Туре	of Co			<u> </u>		<u>.</u>	-		<u> </u>	P.B.T.D.	i.		
Date Spudded				Date Compl. Ready to Prod.				Total Dep	th		797			
9-17-		0.T. C.		Name of P	5-80	Forms	tion	797 Top Oil/Gas Pay			Tubing Depth			
Elevations (DF)	, KNB,	KI, Gr	t, ele.,	Hospa		,		786			756			
Perforations							., 				Depth Cast	-		
open	hol	е										<u> 786'</u>		
								D CEMENT	ING RECOR		T			
HOLE SIZE				CASI	NG &	TUBIN	G SIZE	DEPTH SET			SACKS CEMENT			
7.7/8	7 7/8			2 3/8				786 7561						
4 1/2				2 3/0				7.8-						
								1						
TEST DATA	AND	REQU	EST FO	R ALLO	WABLI	E IT	est must be a ble for this d						Bed up allow	
Date First New Oil Run To Tanks				Date of Test				Producing Method (Flow, pump, gas life			DIST. 3			
11-9-80				11-10-80				DUMP Casing Pressure			Chok Size			
Length of Teet				Tubing Pre	988W0						full			
24 Actual Prod. During Test				Oil - Bble.			-	Vac			Gas-MCF			
25.36				24.3	6			1			<u> </u>			
			<u>+</u>					•						
GAS WELL								Toble Con	decession All MCE	 	Grevity of	Condensate		
Actual Prod. Tool-MCF/D				Length of	Teal			Bble. Condensate/MMCF						
Teeling kielhod (pitol, back pr.)			Tubing Pressure (shut-im)				Coming Pressure (Shut-in)			Choke Size				
				12			 	1	חוו רר	NSFRVAT	ועות-מסוי	SION		
:ERTIFICAT								APPRO	N N	NSERVAT	980		19	
hereby certif	1		ad with a	end that !	ine inid	Itmalio	U L'AEU	Original Signed by CHANGES STORES						
livision have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.								TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3						
_		1	O_A	А				Th	s form is to	be filed in c	ompliance v	with RULE	1104.	
Ma	h I I	¥.	ble	anp	2			I state to a convert for allowable for a newly drilled or despened						
~~	A		(Signal	wej			-	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.						
W ₁ O ₂									All sections of this form must be filled out completely for allow-					
(Tule)								able on new and recompleted wells.						
11-13-80 (Date)								well name or number, or transporter, or other such thange of transferre						
••								Sep	Separate Forms C-104 must be filed for each pool in multiply completed wells.					