

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

B.K.

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF PERMITS RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S. O.G.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/>
OPERATOR	<input type="checkbox"/>
REGULATION OFFICE	<input type="checkbox"/>
Operator	

Zenith Energy Corporation
Address
Box 1038 Kilgore, Texas 75662

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name: SFPRR Well No.: 27 Pool Name, Including Formation: Gallup-Hospah Miguel Creek Kind of Lease: Fee Fee Lease No.: 0-9725

Location: Unit Letter P; 290 Feet From The South Line and 330 Feet From The East
 Line of Section 20 Township 16N Range 6W, NMPM, McKinley County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)
 Giant Refining Co. 1616 Glenarm Place, Suite 1230 Denver, Colorado 80202

Name of Authorized Transporter of Casinghead Gas or Dry Gas 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 A Sec. 29 Twp. 16N Rge. 6W Is gas actually connected? No When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth	P.B.T.D.				
10-2-80	10-20-80		754'	751'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay	Tubing Depth				
6406' Gr	Hospah		718'	721'				
Perforations				Depth Casing Shoe				
719'-746'				751'				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
7 7/8"	4 1/2"	751'	160
4 1/2"	2 3/8"	721'	

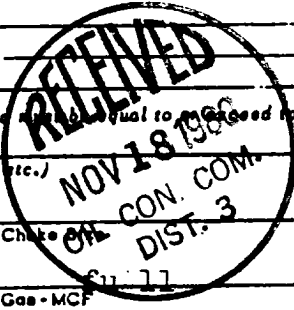
TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and gas equal to allowed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks: 11-10-80 Date of Test: 11-11-80 Producing Method (Flow, pump, gas lift, etc.): pump

Length of Test: 24 hr Tubing Pressure: 0 Casing Pressure: vac Choke Size: 11

Actual Prod. During Test: 25 bbl Oil - Bbls.: 21 Water - Bbls.: 4 Gas - MCF: 0



GAS WELL

Actual Prod. Test - MCF/D: Length of Test: Bbls. Condensate/MMCF: Gravity of Condensate:

Testing Method (pilot, back pr.): Tubing Pressure (shot-in): Casing Pressure (shot-in): Choke Size:

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Mary Blanks (Signature)
Rep (Title)
11-15-80 (Date)

OIL CONSERVATION DIVISION
 APPROVED NOV 18 1980, 19
 BY Original Signed by CHARLES GHOLSON
 TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

This form is to be filled 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.