

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES REQUIRED	
DISTRICT	
SANTA FE	
FILE	
U.S.O.G.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/>
OPERATOR	<input type="checkbox"/>
PRODUCTION OFFICE	<input type="checkbox"/>

Operator GURLEY OIL COMPANY	
Address P.O. BOX 2092, FARMINGTON, NM 87499	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Change in Operator
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner BLACK OIL, INC., P.O. BOX 537, FARMINGTON, NM 87499

DESCRIPTION OF WELL AND LEASE

Lease Name STATE MARGIE	Well No. 2	Pool Name, including Formation Nose Rock - Hospah Ext.	Kind of Lease State, Federal or Fee	State	Lease No. LG-9425
Location					
Unit Letter B : 330' Feet From The North Line and 2310' Feet From The East					
Line of Section 16 Township 20N Range 12W, NMPM, McKinley County					

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
N/A	
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 Sec. Twp. Rge. Is gas actually connected? 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 <input checked="" type="checkbox"/>	Gas well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 6/24/87	Date Compl. Ready to Prod. 7/20/87	Total Depth 2242'	P.B.T.D. 2205'					
Elevations (Dk, RT, GR, etc.) 6118 GR	Name of Producing Formation Hospah Sand	Top Oil/Gas Pay 2169'	Tubing Depth 2183'					
Perforations 2169'-2176'			Depth Casing Shoe 2241'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8" J-55 20#	100'	85 sk.Cl."B"Neat 100cu.ft.					
7-7/8"	5-1/2" J-55 15.5#	2242'	325 sks 65/35 594 cu.ft.					
			100 sk.Cl."B"Neat to Surf.					

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 (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-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.

Mike Maloney
(Signature)
Agent - Gurley Oil Co.
(Title)
2-4-88
(Date)

OIL CONSERVATION DIVISION

APPROVED Feb 17, 1988
BY Frank J. [Signature]
SUPERVISOR DISTRICT 13

TITLE _____

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.