

NO. OF COPIES RECEIVED
DATE RECEIVED
CONTACT
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
/ 000
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Dave M. Thomas, Jr.

Address
P.O. Box 2026 Farmington, New Mexico 87401

Person(s) for filing (Check proper box)

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

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Chacon Jicarilla	Well No. 12	Pool Name, including Formation Ballard Pictured Cliffs	Kind of Lease Jicarilla State, Federal or Fee Apache	Lease No. Contract No. 412
Location Unit Letter : A : 790' Feet From The North Line and 790' Feet From The East				
Line of Section 9 Township 23N Range 3W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990 Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? No	When Unknown

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

V. 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 8/4/78	Date Compl. Ready to Prod. 8/10/78		Total Depth 3212'		P.B.T.D. 3172'			
Elevations (DF, RKB, RT, GR, etc.) 7334' KB	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 3124'		Tubing Depth 3097'			
Perforations 3124'-3130', 3136'-3141', 3148'-3158', & 3162'-3168'					Depth Casing Shoe 3212'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4	8-5/8"		133'		125			
7-7/8	4-1/2"		3212'		190			
	1-1/4"		3097'					

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 3/4"-767, CAOF-905	Length of Test 3 hrs.	Bbls. Condensate/MMCF --	Gravity of Condensate --
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 850 psig	Casing Pressure (shut-in) 850 psig	Choke Size 3/4"

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.

FOR: Dave M. Thomas, Jr.

Ewell N. Walsh, p^{Signature}
President, Walsh Eng. & Prod. Corp.

9/8/78

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19__

BY _____

TITLE _____
SUPERVISOR DIST. #2

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.