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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATION	
PRODUCTION OFFICE	

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

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

B.R.

Operator Grace Petroleum Corporation	
Address Three Park Central, Ste 200, 1515 Arapaho St., Denver, CO 80202	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	

I. DESCRIPTION OF WELL AND LEASE

Lease Name Grace Federal 1	Well No. 1	Pool Name, including Formation Lybrook - Gallup	Kind of Lease State, Federal or Fee	Lease No. SF-078362
Location				
Unit Letter E	: 1650	Feet From The North	Line and 840	Feet From The East West
Line of Section 1	Township 23N	Range 7W	, NMPM, Rio Arriba County	

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Merit Oil Corporation	Address (Give address to which approved copy of this form is to be sent) Ste 300, 300 W. Arrington, Farmington NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Southern Union Gas Co. Gas Co. of N.M.	Address (Give address to which approved copy of this form is to be sent) First International Bldg, Dallas TX 75207	
If well produces oil or liquids, give location of tanks. E 1 23N 7W	Is gas actually connected? No	When After R-O-Way approval

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6/20/80	Date Compl. Ready to Prod. 9/12/80	Total Depth 5500'	P.B.T.D. 5481'					
Elevations (DF, RKB, RT, GR, etc.) 6799' GR	Name of Producing Formation Gallup	Top Oil/Gas Pay 1700'	Tubing Depth 5160'					
Perforations 5140-50. 5240-70, 5338-32, 5370-90, and 5414-24 1 shot/2 ft.			Depth Casing Shoe 5500'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12-1/4	CASING & TUBING SIZE 8-5/8" 24#		DEPTH SET 335		SACKS CEMENT 240 6x + 28 6x			
same as on completion report								

IV. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

Date First New Oil Run To Tanks 9/8/80	Date of Test 9/12/80	Producing Method (Flow, pump, gas lift, etc.) Plunger lift	
Length of Test 5 days	Tubing Pressure N/A	Casing Pressure 500	Choke Size N/A
Actual Prod. During Test 24.9/BPD	Oil - Bbls. 124.5	Water - Bbls. TR	Gas - MCF 50

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

V. 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.

Bery Stranberg
(Signature)
Drilling Engineer
(Title)
9/12/80
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **Original Signed by FRANK T. CHAVEZ**
TITLE **SUPERVISOR DISTRICT #3**

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.