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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Chace Oil Company, Inc. 4 1982 Address DUI 313 Washington, SE, Albuquerque, NM 87108
Reoson(s) for filing (Check proper box) ું ⊖ivi. Other (Please explain) DIST. 3 X New Well Change in Transporter of: Recompletion Dry Gas Change in Ownership Casinahead Gas Condensate If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation unulla Kind of Lease Lease No. 9 State, Federal or Fee Jicarilla 71 S. Lindrith Gallup Dakota Indian 71 Location 550 Α north_Line and___ 330 Feet From The Unit Letter Feet From The 10 23N 4W Line of Section Township Range , NMPM, II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil 💢 P. O. Box 1702, Farmington, NM 87401
Address (Give address to which approved copy of this form is to be sent) The Permian Corporation Name of Authorized Transporter of Casinghead Gas XX or Dry Gas El Paso Natural Gas Company P. O. Box 1492, E1 Paso, TX 79978 Is gas actually connected? When Sec. Twp. P.ge. Unit If well produces oil or liquids, 10 23N Α 4W No If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA New Well Workover Oil Well Gas Well Same Res'v. Diff. Res'v. Deepen Plug Back Designate Type of Completion - (X) · X Total Depth Date Compl. Ready to Prod. P.B.T.D. 8-24-82 9-24-82 7655! 7610 KB Name of Producing Formatiakota Top Oll/Gas Pay Elevations (DF, RKB, RT, GR, etc.) 740<u>6' GL</u> 7420 KB Gallup, Greenhorn 7388-7429' Da 6606 7324 7541 7544 KB Depth Casing Shoe Dakota "A": Dakota 7541-7574 "D: 7653' KB Upr Gallup: 6066-6100' Gallup: 6322-65381 Greenhorn: 7324-7346 TUBING, CASING, AND CEMENTING RECORD DEPTH SET SACKS CEMENT HOLE SIZE CASING & TUBING SIZE 9 5/8" 8 5/8" 214' KB 240 sxs (432 CF) 7 7/8" 4 1/2" 7653' KB 1375 sxs (2475 CF) 2 3/8" tubing 7544' KB V. TEST DATA AND REQUEST FOR ALLOWABLE (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) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test 9-24-82 9-27-82 <u>Flowing</u> Choke Size Casing Pressure Length of Test Tubing Pressure 2" Gas-MCF 24 hours 20 800 Actual Prod. During Test Otl-Bbls. 265 225 40 4Ω **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) OIL CONSERVATION COMMISSION I. CERTIFICATE OF COMPLIANCE APPROVED OT By Original Signed by FRANK T. CHARLE 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. SUPERVISOR DISTRICT # 3 TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

Sept. 30, 1982

	0 -	
	(Signature)	
Geologist	(5.8/10.2.0)	
	(Title)	

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.