ENERGY AND MINERALS DEPARTMENT

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00. 01 609129 peccives				
DISTRIBUTION				
SANTA PE		1-		
FILE				
U.A.U.A.				
LAND OFFICE				
TRANSPORTER	OIL			
	DAS			
OPERATOR			\neg	

7/24/86

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

	U.A.U.0.						
•	TRANSPORTER DIL	REQUEST	REQUEST FOR ALLOWABLE				
1.	OPERATOR PROBATION OPPICE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
	GREAT WESTERN RESOURCES INC.						
	Address RESTERN R	ESOURCES INC.					
	9800 Centre Par	kway, Suite 900, Houston	, Texas 77036				
	New Well	Change in Transporter of:	Other (Please e	·			
,	Recompletion Change in Ownership \overline{X}	• · · · · · · · · · · · · · · · · · · ·	ry Gas From W.B.	CHANGE OF OPERATOR Martin & Associates, Inc.			
	If change of ownership give nar and address of previous owner	w. B. Martin & Assoc	dahan Tara	rth Butler gton, NM 87401			
IJ.	DESCRIPTION OF WELL A	ND I FASE					
	Lease Name Martin-Whittaker Locallon	Well No. Pool Name, including		ond of Lease Jicarilla Apache Lease 1 ate, Federal or Fee (Federal)			
	Unit Letter A	660 Feet From The North	760	East			
Ĺ	Line of Section 7	Township 23N Range	4W , м мрм,	Rio Arriba			
III. 1	DESIGNATION OF TRANSPORMED OF Authorized Transporter of	ORTER OF OIL AND NATURAL OIL X or Condensate		hich approved copy of this form is to be sent)			
1	Giant Refining Compar		P. O. Box 256, Farmington, NM 87499				
	Name of Authorized Transporter of Casinghead Gas X or Dry Gas El Paso Natural Gas Company		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, TX 79978				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connected?	When			
L	this production is commingled	with that from any other lease or poo		10/30/84			
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Western Description							
	Designate Type of Comple	tion — (X) Oil Well Gas Well	New Well Workover D	eepen Plug Back Same Res'v. Diff. Res			
	Date Spudded 12/24/83	Date Compl. Ready to Prod. 4/13/84	Total Depth 6960	P.B.T.D. 6909 KB			
Ē	levations (DF, RKB, RT, GR, etc., 6894 KB		Top Oll/Gas Pay	Tubing Depth			
P	eriorations		3422 KB	5422 KB 6549 KB Depth Casing Shoe			
<u> </u>	5422-5502, 5673-5915,		6960 KB				
-	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET				
	121"	9-5/8" 40# casing	280 KB	206.5'3 C1 B 2% CaCl ₂			
	8-3/4"	7" 23# casing	4820 KB	842 ³ Thixotropic 65/3			
	61"	4½" 11.6# casing	4820 - 6960 KB (Jin	320 ¹³ Selfstress			
	4½"		6549 KB	26) J20 Selistiess			
V. TE	EST DATA AND REQUEST F L WELL	FOR ALLOWABLE (Test must be	after recovery of total volume of	load oil and must be equal to or exceed top allo			
	tie First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)				
L	ngth of Test	Tubing Pressure	Casing Pressure	Choke Size			
Ac	tual Prod. During Test	Oil-Bhia.	Water - Bble.	Fig. 1			
			Cit	onlow -			
GA	S WELL		D	क्षर. ७			
Ac	tual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
Tel	eling Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
l. CEI	RTIFICATE OF COMPLIANCE	C E	OIL CONSE	RVATION DIVISION			
Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.			APPROVED				
			BY Snamp . Java				
			TITLE SUPERVISOR DISTRACT # 3				
	Dith At		This form is to be filed in compliance with MULE 1104.				
\leq	Sathy Carten (Signa	iwe) .	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 MULE 111. All sections of this form must be filled out completely for allow-				
,	Engineering Assistant						
	(Tid	•)	All sections of this for able on new and recomplet	rm must be filled out completely for allowed wells.			

Fill out only Sections I, II, III, and VI for changes of owner.