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ND OFFICE		
TRANSPORTER	OIL	
	GAS	
PERATOR		
RORATION OFFICE		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-85

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RECEIVED
MAY 08 1984
OIL CON. DIV.
DIST. 3

Chace Oil Company, Inc.	
313 Washington, S. E., Albuquerque, NM 87108	
Person(s) for filing (Check proper box)	Other (Please explain)
Well <input checked="" type="checkbox"/>	Change in Transporter of:
Completion <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"/>
Change of ownership give name	
Address of previous owner	

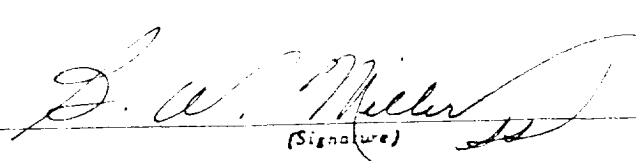
DESCRIPTION OF WELL AND LEASE	
Lease Name Jicarilla	Well No. 30
Tribal Contract 71	Pool Name, Including Formation S. Lindrith Callup Dakota
Kind of Lease Indian	Lease No. 71
State, Federal or Fee	
Location	
Unit Letter 'D'	660 Feet From The NL Line and 360 Feet From The WL
Line of Section 10	Township 23N Range 4W, NMPM, Rio Arriba County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Corp.	P. O. Box 1702, Farmington, NM 87499
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)
Northwest Pipeline Co.	P. O. Box 1526, Salt Lake City UT 84110
Well produces oil or liquids, give location of tanks.	Is gas actually connected? When
'D' 10 23N 4W	No

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 XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.	
Date Spudded 4/10/84	Date Compl. Ready to Prod. 5/2/84	Total Depth 7555' KB	P.B.T.D. 7441' KB						
Measurements (DF, RKB, RT, GR, etc.) 7198' GR 7210' KB	Name of Producing Formation Gallup Dakota	Top Oil/Gas Pay 5836' KB	Tubing Depth 7205' KB						
Perforations Dakota 'D' 7276'-7333' Greenhorn 7060'-7096'	Depth Casing Shoe 7484' KB								
Gallup 5836'-6303' Dakota 'A' 7155'-7188' Tootie 6735'-6854'									
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT						
8 5/8"	24 lb/ft.	218' KB	170 SKS (200 CF)						
4 1/2"	11.6 lb/ft.	7485' KB	1625 SKS (2765 CF)						
	2 3/8"	7205' KB							

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 5/4/84	Date of Test 5/5/84	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 24 Hrs.	Tubing Pressure 160	Casing Pressure 170	Choke Size 2"
Actual Prod. During Test 195 BBLs.	Oil - Bbls. 145 BBLs.	Water - Bbls. 50 BBLs.	Gcs - MCF 20

GAS WELL	
Actual Prod. Test - MCF/D	Length of Test
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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
 (Signature)	
President	(Title)
May 7, 1984	(Date)
OIL CONSERVATION COMMISSION	
APPROVED MAY 08 1984, 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.	