

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

| | |
|---|--|
| Operator GREAT WESTERN RESOURCES INC. | |
| Address 9800 Centre Parkway, Suite 900, Houston, Texas 77036 | |
| Reason(s) for filing (Check proper box) | Other (Please explain) |
| New Well <input type="checkbox"/> | Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Recompletion <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| Change in Ownership <input checked="" type="checkbox"/> | CHANGE OF OPERATOR From W.B. Martin & Associates, Inc. |
| If change of ownership give name and address of previous owner W. B. Martin & Associates, Inc. 709 North Butler Farmington, NM 87401 | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------|--|-----------------------------------|------------------|
| Lease Name Martin-Whittaker | Well No. 29 | Pool Name, Including Formation S. Lindrith Gallup-Dakota Ext. | Kind of Lease Jicarilla Apache | Lease No. 398 |
| Location Unit Letter M : 850 Feet From The South Line and 770 Feet From The West Line of Section 15 Township 23N Range 4W , NMPM, Rio Arriba County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---|---|------------|-------------|------------|-----------------------------------|------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 256, Farmington, NM 87499 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> 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, give location of tanks. | Unit M | Sec. 15 | Twp. 23N | Rge. 4W | Is gas actually connected? Yes | When 10/30/84 |

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

IV. COMPLETION DATA

| | | | | | | | | | |
|--|--|--|-----------------------------------|-----------------------------------|-----------------------------------|---------------------------------|------------------------------------|---|---------------------------------------|
| Designate Type of Completion - (X) | | Oil Well <input checked="" type="checkbox"/> | Gas Well <input type="checkbox"/> | New Well <input type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res'v. <input checked="" type="checkbox"/> | Diff. Res'v. <input type="checkbox"/> |
| Date Spudded 6/17/84 | Date Compl. Ready to Prod. 10/01/84 | Total Depth 7150 | | P.B.T.D. 7148 | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 7183' GR | Name of Producing Formation Gallup-Dakota | Top Oil/Gas Pay 5620 | | Tubing Depth 7054 | | | | | |
| Perforations 5620-6691, 7018-22 | | | | Depth Casing Shoe 7148 | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | | |
| 12 1/2" | 9-5/8" casing | | 374 | | 230.1' ³ | | | | |
| 7-7/8" | 5 1/2" casing | | 7148 | | 1935' ³ | | | | |
| | 2-3/8" tubing | | 7054 | | | | | | |

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 | Length of Test | Bbls. Condensate/MMCF | Gally of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Kathy Carter (Signature)
Engineering Assistant

(Title)

7/24/86

(Date)

OIL CONSERVATION DIVISION

APPROVED

BY

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.