DISTRIBUTION LANTA PE 1.1.0.8. AND OFFICE PANSPORTER GAS

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Separate Forms C-104 must be filed for each pool in multiply completed wells.

rper dior				
W. B. Martin & Ass	ociates, Inc		Will of the state	
700 M Dutles E-)7/ O7/01		1	
709 N. Butler, Far	mington, NM 87401	Other (Please expla		
om Mell	Change in Transporter of:	-	.,	
ecompletion	Oi1	Dry Gas AMMENDED**	BRACKETS	
hande to Ownership	Casinghead Gas	Condensate		
thenge of ownership give ne				
1 address of previous owner				
SCRIPTION OF WELL A				
Martin-Whittaker	Well No. Pool Name, Inci		Federal or For Warula Locate No.	
regulon.	JZ J. LINULLU	h Gallup-Dakota Ext. Sico.	#398	
Unit Letter C ;	690' Feet From The North	hLine and1690! Fee	From The West	
Line of Section 16	2211			
Ellie Or Section	Township ZJN Rom	NMPM, Rio	Arriba Count	
SIGNATION OF TRANSP	ORTER OF OIL AND NATUR			
•	f Oil or Condensate		approved copy of this form is to be sent)	
Giant Refining Co.	f Casinghead Gas ar Dry Gas	Address (Give address to which	rmington, NM 87499	
El Paso Natural Gas	. C0.	P.O. Bex 1492, El	·	
	_	lge. Is gas actually connected?	When	
e location of tanks.	2011	4W No	Waiting on Contract	
MPLETION DATA	with that from any other lease or	pool, give commingling order number	T.	
Designate Type of Compl	etion — (X)		Plug Back Same Resty, Diff. Rest	
• Spudded	Date Compl. Ready to Prod.	Total Depth	P. T. D.	
7/1/84	8/18/84	7166' KB	P.B.T.D. 5 **716 € ' KB	
rations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oti/Gas Pay	Tubing Depth	
7050 'Gr	Gallup-Semilla	**5902'	6655 'KB	
	'', 6112'-16', 6589'-94'		Depth Cosing Show **7165' KB	
		, AND CEMENTING RECORD	7105 110	
HOLE SIZE	CASING & TUBING SIZE	E DEPTH SET	SACKS CEMENT	
12½"	9 5/8" Casing 32#	I-55 242 KB	206.50ft Class B 2% Cacl 2	
7 7/8"	5½'' Casing 17# K-55	7165 **	1st Stage-94.2ft 50/50 Poz	
	2 3/8 tubing	16655'KB stage 314 ft ³	tail 480ft ³ 10-1 Thix. 2nd 50/50 per tail 768ft ³ 10-1 Thix	
T DATA AND REQUEST	FOR ALLOWABLE (Test mus	t be after recovery of total volume of los	ed oil and must be equal to or extend top ails	
First New Oil Run To Tanks	Date of Test	his depth or be for full 24 hours) Producing Method (Flow, pump,	lift see i	
8/18/84	8/20/84	Pumping	- 171, 131,	
tn of Teet	Tubing Pressure	Cosing Process	Choke Size	
24 hrs	45#	45#	3/4	
62.13	62	Water - Bhis. 1/4 bbl	Gas-MCF 52	
02.10	- 1 02	1/4 001	JZ	
WELL d Prod. Tool-MCF/D				
a Proc. 1001-MCF/D	Length of Teet	Bhis. Condensate/A&CF	Gravity of Condensate	
ng Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shub-is)	Choke Size	
TFICATE OF COMPLIANCE			OIL CONSERVATION DIVISION	
by certify that the rules and	regulations of the Oil Conservat	APPROVED	OCT 26 1984	
on have been complied with and that the information given is true and complete to the best of my knowledge and belief.			Original Signed by FRANK T_CHAVEZ SUPERVISOR DISTRICT # 3	
		1-t. SY Viginal Signed		
	.7	TITLE	THE PROPERTY OF THE PROPERTY O	
OPERATOR (Please) (Please)		This form is to be filed	This form is to be filed in compliance with MULE 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 MULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I. H. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.	
		If this is a request for a		
		tests taken on the well in a		
		Fill out only Sections		
		well name or number, or trans		