

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-104
Supersedes Old C-104 and C-117
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Chace Oil Company, Inc.

Address
313 Washington, SE, Albuquerque, NM 87108

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla Apache 71	Well No. 39	Pool Name, Including Formation South Lindrith, Gallup Dakota	Kind of Lease State, Federal or Fee Indian	Lease No. 71
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Location
Unit Letter 'O' 660 Feet From The south Line and 1980 Feet From The east
Line of Section 9 Township 23N Range 4W, NMPM, Rio Arriba County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1702, Farmington, NM 87499		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas	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 Sec. Twp. Rge. 0 9 23N 4W	Is gas actually connected? No	When

If 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res't. <input type="checkbox"/> Diff. Res't. <input type="checkbox"/>		
Date Spudded 10/23/84	Date Compl. Ready to Prod. 11/14/84	Total Depth 7267' KB	P.B.T.D. 7224' KB
Elevations (DF, RKB, RT, GR, etc.) 7101' GL; 7114' KB	Name of Producing Formation Gallup Dakota	Top Oil/Gas Pay 5562' KB	Tubing Depth 7088' KB; 7052' S. N.
Perforations Dakota 'D': 7118'-7176; Greenhorn: 6917'-6948'; Gallup: 5562'-6122'; Dakota 'A': 7006'-7030'; Tociro: 6686'-6692'	Depth Casing Shoe 7266' KB		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	225' KB	170 sks (200 CF)
7 7/8"	4 1/2"	7267' KB	1680 sks (2777 CF)
	2 3/8"	7088' KB	None

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of load off 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 11/15/84	Date of Test 11/16/84	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 24 hours	Tubing Pressure 142 PSI	Casing Pressure 169 PSI	Choke Size 2"
Actual Prod. During Test 169 bbls	Oil - Bbls. 122	Water - Bbls. 47	Gas - MCF 21

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
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.

L. W. Miller
(Signature)
President
(Title)
November 20, 1984
(Date)

OIL CONSERVATION COMMISSION

NOV 21 1984

APPROVED

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 multiple completions.