

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Oil Conservation Commission

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

FILE

U.S.G.S.

LAND OFFICE

TRANSPORTER

OPERATOR

PRORATION OFFICE

OIL

GAS

Chace Oil Company, Inc.

313 Washington SE, Albuquerque, NM 87108

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Casinghead Gas

Dry Gas

Condensate

Other (Please explain)

First delivery of gas

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name

Well No.

Pool Name, Including Formation

Kind of Lease

Lease No.

Jicarilla Tribal Cont. #47

15

South Lindrith Gallup Dakota

Jicarilla
State, Federal or Fee Indian

47

Location

Unit Letter

Feet From The

Line and

Feet From The

'G'

2127

north

2003

east

Line of Section

Township

Range

NMPM

Rio Arriba County

County

11

23N

4W

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil

or Condensate

Address (Give address to which approved copy of this form is to be sent)

Mancos Corporation

P. O. Drawer 1320, Farmington, NM 87499

Name of Authorized Transporter of Casinghead Gas

or Dry Gas

Address (Give address to which approved copy of this form is to be sent)

El Paso Natural Gas Company

P. O. Box 1702, Farmington, NM 87499

Well produces oil or liquids,
give location of tanks.

Unit

Sec.

Twp.

Rge.

Is gas actually connected?

When

G

11

23N

4W

Yes

9/26/85

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

Gas Well

New Well

Workover

Deepen

Plug Back

Same Res't.

Diff. Res't.

Date Spudded

Date Compl. Ready to Prod.

Total Depth

P.B.T.D.

Revisions (DF, RKB, RT, CR, etc.)

Name of Producing Formation

Top Oil/Gas Pay

Tubing Depth

Perforations

Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

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

AS WELL

Actual Prod. Test - MCF/D

Length of Test

Bbls. Condensate/MCF

Gravity of Condensate

Cementing 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

Title

Date

APPROVED

BY

TITLE

Original Signed by FRANK T. CHAVEZ

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 deepen
well, this form must be accompanied by a tabulation of the deviate
tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for alle
wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of own
well name or number, or transporter, or other such change of conditi
Separate Forms C-104 must be filed for each pool in multi
completed wells.