

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

NOV 04 1986

OIL CON. DIV.
DIST. 3

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FILE	
U.S.D.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

Operator

JACK A. COLE

Address

P. O. BOX 191, FARMINGTON, NEW MEXICO 87499

Reason(s) for filing (Check proper box)

- ☒ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter at:

- ☐ Oil ☐ Dry Gas
☐ Casinghead Gas ☐ Condensate

Other (Please explain)

Request for approval to sell gas while recovering frac oil.

Change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Marcus	Well No. 8	Pool Name, including Formation Lybrook Gallup	Kind of Lease State, Federal or Fee SF	Lease No. 078362
Location				
Unit Letter <u>B</u> : <u>410</u> Feet From The <u>North</u> Line and <u>2150</u> Feet From The <u>East</u>				
Line of Section <u>12</u> Township <u>23N</u> Range <u>7W</u> , NMPM, <u>Rio Arriba</u> County				

II. 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)
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico	P.O. Box 1899, Bloomfield, N.M. 87413
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>B</u> Sec. <u>12</u> Twp. <u>23N</u> Rqs. <u>7W</u>	Yes October 21, 1986

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

NOTE: Complete Parts IV and V on reverse side if necessary.

I. 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 is true and complete to the best of my knowledge and belief.

Dewayne Blancett DEWAYNE BLANCETT
(Signature)
PRODUCTION SUPERINTENDENT
(Title)
November 3, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED

BY

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

TITLE

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.

V. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reentry	Diff. Reentry
		X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
9-21-86	11-1-86		5750		5702				
Services (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
6998' GL 7010' KB	Gallup		5428		5661				
Perforations	5428-5440	5554-5558	5602-5605	5626-5628	Depth Casing Shoe				
	5450-5452	5596-5600	5620-5623	5630-5636	5743				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8 24.0 lb.	262	250 sacks 295 ft.
7 7/8	4 1/2 10.50 lb.	5743	725 sacks 1361 ft.
	2 3/8	5661	

TEST DATA AND REQUEST FOR ALLOWABLE (Text 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)

First New Oil Run To Tanks		Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Flowing to recover frac oil				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Initial Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF	

S WELL

Initial Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Flowing Method (pump, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size