## DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER GAS OPERATOR PROBATION OFFICE

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

## AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator CHACE OIL COMPANY, INC. Address Albuquerque, NM 87108 313 Washington S.E. Other (Please explain) Reason(s) for filing (Check proper box) DAte of change and Change in Transporter of: Dry Gas Oil Recompletion Casinghead Gas Condensate Change in Ownership if change of ownership give name and address of previous owner \_\_\_\_ W. DESCRIPTION OF WELL AND LEASE Lease No. Well No. Pool Name, Including Formation Kind of Lease State, Federal or Fee Indian 15 CHACE APACHE 15 1 CHACON DAKOTA i\_ocation "A" 790' <u> 790'</u> ELNL. Feet From The \_\_\_\_ Feet From The Line and Unit Letter Sandoval County 20 Township 23N 3W , NMPM, Range Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil X P. O. Box 1183 Houston, TX 77001
Address (Give address to which approved copy of this form is to be sent) PERMIAN CORPORATION Name of Authorized Transporter of Casinghead Gas X or Dry Gas P. O. Box 1492 El Paso, TX 79978 EL PASO NATURAL GAS COMPANY Is gas actually connected? Pae. Unit If well produces oil or liquids, July 26, 1977 23N 3W Yes 20 Α give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back | Same Res'v. Diff. Res'v Workover Oil Well Gas Weli New Well Designate Type of Completion - (X) X Χ Date Compl. Ready to Prod Total Depth 3 - 13 - 777650 7620 2-27-77 Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 7340 7233 7224 GR Dakota Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 10-3/4" 4-1/2" 2-3/8" 160 sxs 200 13-1/2" 1000 sxs 7**-**7/8'' 7660 7340 (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) TEST DATA AND REQUEST FOR ALLOWABLE AL WELL Producing Method (Flow, pump, gas lift, etc.) are a plus how one nun co Tranks Date of Test Choke Size Casing Pressure Tubing Pressure enuth of Test as-MCF Water - Bble. Actual Prod. During Test Oli-Bble. MAR 2 2 1978 GAS WELL Gravity of Condensate
OIL CON. COM. Bble. Condensate/MMCF Actual Prod. Test-MCF/D Length of Test Choke Bis 1. 3 Casing Pressure (Shut-in) Tubing Pressure (Shut-in) leading Mathod (pitot, back pr.) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE 10 t hereby certify that the rules and regulations of the Oil Conservation Communication have been complied with and that the information given above is true and complete to the beat of my knowledge and belief. APPROVED Original Signed by A. R. Kendrick TITLE LEGISLA This form is to be filled in compliance with nut E 1104. 1 154 / 201 tour fold the source is the foliate can be letter of my tour foliates on the cott in accompanies the Ring source. An sections of this form must be filled out completely for allowable on new and recompleted wells. Prasident 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. 3-20-78 Separate Forms C-104 must be filed for each pool in multiply completed wells. (Date)