

NEW MEXICO OIL CONSERVATION COMMISSION
PERMIT FOR ALLOWABLE
TRANSPORTATION TO TRANSPORT OIL AND NATURAL GAS

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

B.K.

WELL NO.	6
WELL NAME	1
FILE NO.	1
U.S.G.A.	1
LAND OFFICE	1
TRANSPORTER	1
OPERATION	2
PERMIT OFFICE	2

Operator DAVE M. THOMAS, JR.	
Address P. O. Box 2026 Farmington, N.M. 87401	
Reason(s) for filing (check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE		Contract	
Well Name Chacon Jicarilla Apache "D"	Well No. 101	Pool Name, including Formation Chacon Dakota Associated	Kind of Lease Jicarilla Apache
Location		Lease No. 55-A	
Unit Letter L	1850	Feet From The South	Line and 790
Line of Section 26		Township 23N	Range 3W
		, NMPM, Sandoval County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS							
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)			
Permian Corporation				P. O. Box 1702 Farmington, N.M. 87401			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company				P. O. Box 990 Farmington, N.M. 87401			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 26	Twp. 23N	Rge. 3W	Is gas actually connected?	When Unknown	

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

IV. COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
(X)		XX		XX					
Date Spudded 9/24/78	Date Compl. Ready to Prod. 11/1/78		Total Depth 7590'		P.B.T.D. 7515'				
Elevations (DF, RKE, RT, GR, etc.) 7387' K.B.	Name of Producing Formation Dakota		Top Oil/Gas Pay 7197'		Tubing Depth 7166'				
Perforations 7197'-7246', 7307'-7311' & 7318'-7334'					Depth Casing Shoe 7590'				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4	8-5/8"		278'		225				
7-7/8	4-1/2"		7590'		670				
	2-3/8"		7166'						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL				(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)			
Date First New Oil Run To Tanks 11/3/78	Date of Test 11/6/78	Producing Method (Flow, pump, gas lift, etc.) Flow					
Length of Test 24 Hours	Tubing Pressure 1400 psig	Casing Pressure 1700 psig	Choke Size 3/4"				
Actual Prod. During Test	Oil-Bbls. 90	Water-Bbls. -0-	Gas-MCF 820				

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

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 19____	
FOR: DAVE M. THOMAS, JR.		Original Signed by FRANK F. CHAVEZ	
Ewell N. Walsh, P.E. (Signature) President Walsh Engineering & Prod. Corp.		BY _____	
11/28/78 (Date)		DEPUTY OIL & GAS INSPECTOR, DIST. #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 recompleted wells.	