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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

API 30-043-20427

Operator DAVE M. THOMAS, JR.	
Address P. O. Box 2026, Farmington, N.M. 87401	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE		Contract	
Lease Name Chacon	Well No. 105	Pool Name, including Formation Chacon Dakota Associated	Kind of Lease Jicarilla
Jicarilla Apache "D"			State, Federal or Fee Apache
Lease No. No. 55-A			
Location			
Unit Letter D	790'	Feet From The North	790' Feet From The West
Line of Section 36	Township 23N	Range 3W	NMFM, 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)
Merit Oil Company	300 W. Arrington, 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 D Sec. 36 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 <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'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>
Date Spudded 7/16/79	Date Compl. Ready to Prod. 8/30/79
Total Depth 7508'	P.B.T.D. 7410'
Elevation (DF, RKB, RT, GR, etc.) 7340' K.B.	Name of Producing Formation Dakota
Top Oil/Gas Pay 7142'	Tubing Depth 7152'
Perforations 7142'-7184', 7200'-7207', 7250'-7265', 7268'-7278'	Depth Casing Shoe 7480'
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
12-1/4"	8-5/8"
7-7/8"	4-1/2"
	2-3/8"
DEPTH SET	SACKS CEMENT
287'	250 sacks
7480'	615 sacks

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 9/3/79	Date of Test 9/12/79	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 150 psig	Casing Pressure 600 psig	Choke Size 3/4"
Actual Prod. During Test	Oil-Bbls. 90	Water-Bbls. -0-	Gas-MCF 260

GAS WELL	
Actual Prod. Test-MCF/D	Length of Test
Bbls. Condensate/MMCF	Gravity of Condensate 1979
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)
Casing Pressure (Shut-in)	Choke Size

VI. 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.	
FOR: DAVE M. THOMAS, JR.	
Dewayne Blancett	(Signature)
Dewayne Blancett,	Production Foreman
Walsh Engineering & Prod. Corp.	(Title)
9/24/79	(Date)

OIL CONSERVATION COMMISSION	
APPROVED	SEP 27 1979
BY	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.	