

DISTRIBUTION	
DATE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Expires June 29, 1980

B.K.

Operator Jack A. Cole	
Address P. O. Box 191, Farmington, New Mexico 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"/>
Request 2000 barrel test allowable	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Contract No. 360

Lease Name Chacon Amigos	Well No. 1	Pool Name, including Formation Chacon Dakota Associated, Ext.	Kind of Lease Jicarilla Apache	Lease No.
Location				
Unit Letter B	790	Feet From The North	Line and 1850	Feet From The East
Line of Section 2	Township 22N	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)			
Merit Oil Corporation	300 W. Arrington, Suite 30 Farmington, N.M. 87401			
Name of Authorized Transporter of Casinghead Gas <input 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 Co.	P.O. Box 990 Farmington, N.M. 87401			
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 2	Twp. 22N	Rge. 3W
Is gas actually connected?	No		When Temporary June 11, 1980	

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded May 17, 1980	Date Compl. Ready to Prod. June 8, 1980	Total Depth 7165'	P.B.T.D. 7042'					
Elevations (DF, RKB, RT, GR, etc.) 7176'KB	Name of Producing Formation Dakota	Top Oil/Gas Pay 6870'	Tubing Depth 6894'					
Perforations 6973-6984 and 6870-6900	Depth Casing Shoe 7163'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8", 24.0		269		250			
7 7/8	4 1/2", 10.50 & 11.60		7163		1002			
	2 3/8", 4.7, EUE		6894					

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	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

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

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: JACK A. COLE

ORIGINAL SIGNED BY  
Ewell N. WALSH

Ewell N. Walsh, President  
Walsh Engineering & Prod. Corp.

6-9-80

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 9 1980, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE 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 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.