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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OR
	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-110
Effective 1-1-55

B.K.

Operator Grace Petroleum Corporation	
Address Three Park Central, Ste 200, 1515 Arapahoe, Denver, Colorado 80202	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

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

II. DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Federal 19		1	Lybrook-Gallup	State, Federal or Fee Federal	5F078360
Location					
Unit Letter	D	900	Feet From The North	Line and 890	Feet From The West
Line of Section	19	Township	23N	Range	6W, NMPM, Sandoval
County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil ☒ or Condensate ☐	300 W Arrington, Suite 300	Farmington, New Mexico 87401	
Merit Oil Corporation	Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Box 750, Farmington, New Mexico 87401	Is gas actually connected? When	
Gas Co. of New Mexico	No		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	D	19	23N
			6W

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

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Designate Type of Completion - (X)		☒	☐	☒	☐	☐	☐	☐	☐
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
7/29/80	9/21/80	5665		5624					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
6962 KB	Gallup	5250		5268					
Perforations	Depth Casing Shoe		.5665						
5280-68, 5350-56, 5448-52	23 shots .34" hole								
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
12.25	8.625	328		250 sx + 2% CaCl2					
7.875	4.5	5665		250 sx 50:50:2+6.25#					
D V Tool		2977		gilsonite/sx tailed w/50 sx 2nd stage					
				800 sx 50:50:2 tailed in 50 sx "B"					

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.)	
10-8-80	10/8/80	gas lift	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	350	450	NA
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	11.75	trace	10

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

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.		NOV 18 1980	
Kim D. Lucke (Signature) Operations Engineer (Title) 10/17/80 (Date)		APPROVED _____, 19____ 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	