

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

7c

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

| | |
|---|---|
| Operator LEWIS ENERGY CORPORATION | |
| Address 232 North Schwartz, 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"/> |

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

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|---|-----------------------|
| Lease Name Penistaja | Well No. 1 | Pool Name, including Formation Wildcat Gallup | Kind of Lease State, <u>Federal</u> or Fee | Lease No. NM 24449 |
| Location Unit Letter <u>A</u> : <u>500</u> Feet From The <u>North</u> Line and <u>750</u> Feet From The <u>East</u> Line of Section <u>11</u> Township <u>20N</u> Range <u>4W</u> , NMPM, <u>Sandoval</u> 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) P. O. Box 256, Farmington, New Mexico 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) | |
| If well produces oil or liquids, give location of tanks. | Unit A | Sec. 11 |
| | Twp. 20N | Rge. 4W |
| | Is gas actually connected? N/A | When |

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

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 January 1, 1981 | Date Compl. Ready to Prod. June 8, 1981 | | Total Depth 4600' | | P.B.T.D. 4586' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6950' GR | Name of Producing Formation Mancos Shale | | Top Oil/Gas Pay 4112 | | Tubing Depth | | | |
| Perforations 4480 - 4510, 4380 - 4410, 4420 - 4440 | | | | | Depth Casing Shoe 4050' | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12 1/4 | 9 5/8" 32# | | 235' | | 275 sks class "B" | | | |
| 8 3/6 | 7" 20# | | 4050' | | 475 sks class "B" | | | |
| 6 1/2 | 4 1/2" 10.5# | | 3921 top 4598' bottom | | 115 sks class "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 June 10, 1981 | Date of Test July 3, 1981 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 hours | Tubing Pressure -0- | Casing Pressure 30 Psi | Choke Size N/A |
| Actual Prod. During Test 4 bbls total fluid | Oil - Bbls. 3 | Water - Bbls. 1 | Gas - MCF TSTM |

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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)Operations Manager
(Title)October 15, 1981
(Date)

OIL CONSERVATION DIVISION

OCT 19 1981

APPROVED _____, 19____

Original Signed by FRANK T. CHAVEZ

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 filled for each pool in multiply completed wells.