

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
|------------------------|-------------|
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| SANTA FE | |
| FILE | |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | NATURAL GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

| | |
|--|---|
| Operator Lewis Energy Corporation | |
| Address 232 N. Schwartz, Farmington, NM 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 _____

DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|---|---|----------------------|
| Lease Name Lewis 4-20-2 | Well No. 1 | Pool Name, Including Formation Undesignated Gallup | Kind of Lease State, Federal or Fee Federal | Lease No. NM 7765 |
| Location Unit Letter <u>N</u> : <u>860</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>4</u> Township <u>20N</u> Range <u>2W</u> , NMPM, <u>Sandoval</u> County | | | | |

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) | | | | | |
| Giant Refining Company | P.O. Box 256, Farmington, NM 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 N | Sec. 4 | Twp. 20N | Rge. 2W | Is gas actually connected? NA | When |

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

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 12/31/81 | Date Compl. Ready to Prod. 1/20/82 | | Total Depth 4300' | | P.B.T.D. 4300' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6868' GR | Name of Producing Formation Mancos Shale | | Top Oil/Gas Pay 3494' | | Tubing Depth 3441' | | | |
| Perforations 3494'-4300' Open hole | | | | | Depth Casing Shoe 3494' | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 12-1/4 | 8-5/8 | 832 | 560 sx |
| 7-7/8 | 5-1/2 | 3494 | 100 sx |
| NA | 2-3/8 | 3441 | None |

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 1/20/82 | Date of Test 1/23/82 | Producing Method (Flow, pump, gas lift, etc.) Flowing & Swabbing | |
| Length of Test 8 hours | Tubing Pressure 50 - 75# | Casing Pressure 125 | Choke Size None |
| Actual Prod. During Test 100 bbls. | Oil-Bbls. 40 | Water-Bbls. 60 | Gas-MCF 60 |

GAS WELL

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

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.

Zachary C. Lewis
(Signature)
Operations Manager
(Title)

January 25, 1982

(Date)

OIL CONSERVATION DIVISION

APPROVED

Original Signed by FRANK T. CHAVEZ

BY

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 allow-
able 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