

DISTRIBUTION	
SANTA FE	
FILE	
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-1
Effective 1-1-65

I. Operator
JACK A. COLE

Address
P. O. Box 191 Farmington, New Mexico 87401

Reason(s) for filing (check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Indian Bend "A"	Well No. 1	Pool Name, including Formation Ballard Pictured Cliffs	Kind of Lease Jicarilla State, Federal or Fee Apache	Lease No. Contr. #358
Location Unit Letter C : 790 Feet From The North Line and 1820 Feet From The West Line of Section 5 Township 22N Range 2W , NMPM, Sandoval County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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 C Sec. 5 Twp. 22N Rge. 2W Is gas actually connected? NO When

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		X	X					
Date Spudded 4/16/82	Date Compl. Ready to Prod. 5/8/82	Total Depth 3040'	P.B.T.D. 3010'					
Elevations (DF, RKB, RT, CR, etc.) 7436' G.L.	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 2962'	Tubing Depth 2990'					
Perforations 2952'-2962'	Depth Casing Shoe 2956'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	122.43'	100 sacks
7-7/8"	4-1/2"	3028.28'	150 sacks
	1-1/4"	2956'	

VI. 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 3/4-1756; CAOF- 3780	Length of Test 3 hrs.	Bbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 730	Casing Pressure (Shut-in) 730	Choke Size 3/4"

II. 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, PE (Signature) President
Walsh Engineering & Prod. Corp.
(Title)
5/26/82
(Date)

OIL CONSERVATION COMMISSION
6-18-82 JUN 18 1982
APPROVED
Original Signed by CHARLES GHOLSON
BY
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #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 allowance 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 multiple completed wells.