

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Gary-Williams Oil Producer, Inc.

Address
115 Inverness Drive East, Englewood, CO 80112

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:
☐ Oil
☐ Gas
☐ Condensate

Other (Please explain)
OCT 31 1984

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Johnson 7	Well No. 11	Pool Name, Including Formation Rio Puercos Mancos	Kind of Lease State, Federal or Fee Federal	Lease No. NM-44453
Location Unit Letter <u>K</u> : <u>2074</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>7</u> Township <u>20 North</u> Range <u>2 West</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"/> <u>Platteau, Inc. Gary Energy Corp.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1702, Bloomfield, NM 87413</u>					
Name of Authorized Transporter of Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Platteau, Inc. Gary Energy Corp.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1702, Bloomfield, NM 87413</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>K</u>	Sec. <u>7</u>	Twp. <u>20N</u>	Rge. <u>2W</u>	Is gas actually connected? <u>No</u>	When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.

W.P. Marx
W.P. (Signature) Marx
Operations Manager

(Title)
October 29, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 6 1984, 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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7/15/84	Date Compl. Ready to Prod. 9/25/84		Total Depth 4775'		P.B.T.D. 4620'				
Elevations (DF, RKB, RT, GR, etc.), 7017' GL, 7028' KB	Name of Producing Formation Mancos		Top Oil/Gas Pay 4169'		Tubing Depth 4454'				
Perforations C Zone at 4169', 4174', 4198', also perf 4184', 4225', 4266', 4280', 4290'		Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-1/2"	9-5/8"	595.5'	135 sx Pozmix, 150 sx Class B
8-3/4"	7"	3666' KB	5230 sx Pozmix, 100 sx Class B
6"	2-3/8"	4762' 4454'	165 sx Pozmix 884 cf
	4 1/2" Splice	3339 - 4762	208 cf

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 10/9/84		Date of Test 10/11/84		Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours		Tubing Pressure N/A		Casing Pressure N/A	Choke Size N/A
Actual Prod. During Test		Oil - Bbls. 85	Water - Bbls. 0	Gas - MCF 8.95	

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