DISTRICT II P.O. Drawer DD, Artesia, NM 88210

JIL CONSERVATION DIV

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

See Instructions at Bottom of Page

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Wal Ali No. Operator VETERAN EXPLORATION, INC. 300432073100S1 Address ECEIA CO Suite 506, Denver, 80231 7535 E. Hampden Ave., Other (Please explain) Reason(s) for Filing (Check proper box) JUL1 7 1992 Change in Transporter of New Well Dry Gas Recompletion Oil OIL CON. DIV. Casinghead Gas Condensate Change in Operator if change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease No. Well No. Pool Name, Including Formation 15-HW-7 Mancos Kind of Lease State, Federal or Fee San Isidro NM-36936 659/E Location 1980/5 1980 Feet From The North Line and _ 1650 Feet From The East Unit Letter County 20N 3W NMPM, Sandoval 5 4 1 15 Township Range 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 ഠ P.O. Box Gary Williams Energy Bbdomfield, N.M or Dry Gas [Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas N/A If well produces oil or liquids, give location of tanks. Twp. When ? is gas actually connected? Unit Rge. 15 20 N/A N/A G If this production is commingled with that from any other lesse or pool, give commingling order number: IV. COMPLETION DATA Plug Dack | Same Res'v Diff Res'v Oil Well Gas Well New Well | Workover Deepen Designate Type of Completion - (X) X X Date Compl. Ready to Pr P.D.T.D. Date Spudded 9/30/91 /0-3-9/ 7296 MD 9/8/91 7296MD Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) Tubing Depth Name of Producing Formation 6835 GL 4577MD 4307 Mancos Depth Casing Shoe 3305 TVD 4345-4360 MD 4514-7316 TUBING, CASING AND CEMENTING RECORD SACKS CEMENT **DEPTH SET** CASING & TUBING SIZE HOLE SIZE 616 to surface Cement 200 5/8-36#-J-SS 13 1/2 300SX 65/35 Pozmix 3305' 7"-23#-K-SS 8 3/4 100SX Class"B" (118CF) 6628' 1/2-11-6#K-SS 6 1/8 . 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 of Date First New Oil Run To Tank 10-3-91 Date of Test Producing Method (Flow, pump, gas lift, etc.) TEST DATA NOT AVAILABLE AT THIS TIME Choke Size Casing Pressure Length of Text Tubing Pressure 140 -24 HOURS Gas-MCF NO TEST Water - Bbls. Actual Prod. During Test Oil - Bbis. -10 84 BO - 24 HOURS 84 BOPD STIMATED 60 MCFPD GAS WELL Bbls. Condensate/MMCI Gravity of Condensate Actual Prod. Test - MCI/D Length of Test N/A Casing Pressure (Shul-in) Choke Size Tubing Pressure (Shut-in) Texting Micthod (pitot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE **OIL CONSERVATION DIVISION** 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 helief Date Approved JUL 17 1992

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Printed Name

Date

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

By.

Original Signed by CHARLES GHOLSON

Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

2) All sections of this form must be filled out for allowable on new and recompleted wells.

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755-2900

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.