Submit 5 Chiles (1) 30 Appropriate District Office THE 13-CO OUD HEIBU 1991 State of New Mexico Form C-104 Revised J-1-89 Energy, Minerals and Natural Resources Department DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 18/92 See Instructions at Bottom of Page OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088 DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. Coulthurst Management and Investments Addicas 1990 Marin Ave., Berkeley, CA 94707 Reason(s) for Filing (Check proper box) Other (Please explain) New Well AFR**2** 3 1992 ХX Change in Transposter of: Recompletion Dry Gas Change in Operator DIL CON. DIV. Casinghead Gas Condensate If change of operator give name and address of previous operator DIST. 3 II. DESCRIPTION OF WELL AND LEASE 3630 Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No. South San Luis State, Federal or Fee NMSF 0 81171 Location 2310' West 990' Unit Letter . North Feet From The Line 33 Section Sandoval **NMPM** County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Giant Refining Company 384/10 PO Box 256, Farmington, NM 87499 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) If well produces oil or liquids, Unit Rge. Is gas actually connected? When ? give location of tanks. I_C 118N | 3W 33 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA 38750 Oas Well Oil Well New Well Workover Deepen Flug Back Same Res'v Diff Res'v Designate Type of Completion - (X) XXDate Staidded Date Compl. Ready to Prod. P.B.T.D. 2-14-92 658' 10-18-91 619' Elevations (DF, RKB, RT, GR, etc.) 6446 GR Name of Producing Formation Top Oil/Gas Pay Tubing Depth Menefee 525' 610' Perforations Depth Casing Since 525-530', 546-554', 562-580'. 620' TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 10 5/8" 8 5/8" 801 $35 \, sx$ 6 3/4" 4 1/2" 619 120 sxV. 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 Tank Date of Test Producing Method (Flow, pump. gas lyt, etc.) 2-14-92 3-20-92 Pump Length of Text Tubing Pressure Casing Pressure Choke Size 24 hrs. 0 0 open Actual Prod. During Test Oil - Bbls Water - Libis Cas- MCT 4.5 bbl. 4.5 0 TSTM GAS WELL Actual Prod. Test - MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate Tubing Pressure (Shut-in)

l'esting Method (pitot, back pr.) Casing Presoure (Shut in) Choke Size

VI. OPERATOR 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 bound my knowledge and belief.

4-27-92

Date

Signature 7 Pinted Name

Telephone No.

OIL CONSERVATION DIVISION 6-8-92

Date Approved _

JUN - 8 1992

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Connected Brees, C. 1711 L. Ct. 1 g