DISTRIBUTION						Revised	1 1-1-65
SANTA FE	7	NEWA	AEXICO OIL-C	ONSERVATIO	N COMMISSION	Sa. Indicate	Type of Lease
FILE	/ W	TELL COMPLE	TION OR RE	COMPLETIC	N REPORT AND LOG	State	
U.S.G.S.	2					5. State Oil	& Gas Lease No.
LAND OFFICE					•	<del></del>	·
OPERATOR	8				•		
Id. TYPE OF WELL	<del></del>	<del></del>	<del></del>		· · · · · · · · · · · · · · · · · · ·	$\overline{q}$	
IG. TYPE OF WELL		CD) 415				7. Unit Agre	ement Name
b. TYPE OF COMPLE		GAS WELL	LJ DAYL	OTHER.		8. Farm or L	Table Name of the Control of the Con
NEW I WO	ex 🗀	PLUG BACK	DIFF.	_			
2. Namesof Operator	IR L DECPE	NL BACK	L RESVR.L	OTHER	<del></del>	9. Well No.	Fe-Leggs
Dome Pe	troleum Con	rp., 501 Ai	rport Driv	re ·	•		2
3. Address of Operator		F - ,			<del></del>	10. Field an	nd Pool, or Wildcat
Suite 1	07, Farming	gton, New M	exico 874	01		Leggs-	Entrada
4. Location of Well				<del></del>		Timi	
Ì					•		
UNIT LETTER N	LOCATED	990' PEET PE	OM THESOL	th LINE AND	2310 FEET FROM		
		-				12. County	WHIHHH
THE WEST LINE OF	sec. 11 TV	VP. 21N RGI	. 10W NM	PM ()		San Jua	n
					Elevations (DF, RKB, RT, $($	R, etc.) 19.	Elev. Cashinghead
	7/15/78		26/78		6379' GR		
20. Total Depth	i i	Back T.D.	22. If Mult Many	iple Compl., Ho	Drilled By		Cable Tools
5632 24. Producing Intervals		564'		<del></del>	> : 0−5		<u>i</u>
5415' - 560			, Name			. 2	<ol> <li>Was Directional Survey Made</li> </ol>
. 3413 - 360	o Entrada				·		NO
26. Type Electric and C	ther Logs Run	<del></del>	······································			27 W	as Well Cored
Dual Induct	•	log CNI-De	neity/CR	**		27. "	
28.	Ton Eacero		ING RECORD (R	enort all string	s set in well)		NO
CASING SIZE	WEIGHT LB./		<del></del>	OLE SIZE	CEMENTING REC	ORD	AMOUNT PULLED
9 5/8	32.3/		<del></del>	12½	150 sx		none
7''	23# & 20	)# 558		8 3/4	950 sx (2 stag	e)	none
						<u> </u>	
29.	LI	NER RECORD			30.	TUBING RECO	ORD
SIZE	ТОР	воттом	SACKS CEMEN	T SCREEN		PTH SET	PACKER SET
			<del></del>		2 7/8" 3	021'	
	, , ,						
31. Perforation Record (	Interval, size and	number)		32.	ACID, SHOT, FRACTURE,	CEMENT SQL	JEEZE, ETC.
5415'-5422'	with 2 iet	chota por	foot	DEPTH	INTERVAL AMO	UNT AND KIN	D MATERIAL USED
3413 3422	with 2 jet	. Shots per	1001				
						<del></del>	
33.			PRO	DUCTION		·····	
Date First Production	Produc	tion Method (Flou	ing, gas lift, pu	mping — Size an	d type pump)	Well Status	(Prod. or Shut-in)
7/26/78	Pu	mping				Produ	cing
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF Wate	er — Bbl.	Gas - Oil Ratio
7/28/78	24		<u> </u>	62		511	
Flow Tubing Press.	Casing Pressure	Calculated 24- Hour Rate	1	Gas 1	. 1	Oil	Gravity - API (Corr.)
24 Diagraphics of Co. 1	Sold was to the		62	TS			
34. Disposition of Gas (	soia, usea for fuel	, ventea, etc.)			Tes	t Witnessed B	-
35. List of Attachments				·		Ray San	doval
NONE							
	the information sh	nowmon both side	of this form is	true and comple	te to the best of my knowled	ge and helief	•
			, join ts	. 10 Dia compte	seer of my knowled		9
$10^{\circ}$	Smold	Sull	מ	rilling &	Production Supt	DATE8/	3/78
SIGNED	10-0-0	04	_ TITLE		June Dupt	DATE	<u> </u>

ducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall be reported. For multiple completions, items 30, through 34 shall be reported for each zone. The form is to be filled in quintuplicate except on state lead, where six copies are required. See Bute 1165.

# INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

			ລາແນ	neastern	New Mexico				North	vestem N	iew Mexico	
Т. /	\nhy		·	Т.	Canyon		T. Ojo	Λtamo		7	. Penn. "B"	
1	·····			—— T.	Strawn		. T. · Kirtl	and-Frui	tland	т	Penn "C"	
13, 5	· · · · · · · · · · · · · · · · · · ·		<del></del>	— Т.	Atoka		T. Pict	ured Clif	fs	Т	Pan Obi	
1. 1	rates			Т.	Miss		. TCliff	House -		т	. Leadville	
1. /	Kivers			Т.	Devonian	<del></del>	T. Ment	fee			. Madison	
Т. С	Dueen 🗀			T	Silurian		20 10-1-		219		. Elbert	
T. C	Grayburg	:		Т.	Montoya		T. Mano	os	2270		. McCracken	
T. S	an Andi	es_		T.	Simpson		T. Gall		2980		. Ignacio Qtzte	
Т. С	Slorieta		<del></del>	Т.	McKee		Base Gro	enhorn	4120		Granite	
т. Р	eddock		······································	т.	Ellenburger		T. Dako	ta	4302			
Т. Г	Blinebry		<del></del>	т.	Gr. Wash		T. Morri	son	4487			
т. т	ub5			т.	Granite		T Todi	lto	5401			
T. D	rink ard			Т.	Delaware Sand		T Fate		5415			
T. A	ьо			т.	Bone Springs		T Wine	210	· · · · · · · · · · · · · · · · · · ·	l.		
T. W	olfcaing			Т.			T Chief	ate	· · · · · · · · · · · · · · · · · · ·	I.		
т. Р	enn			т			T. Dame	:	· · · · · · · · · · · · · · · · · · ·	T.		
T Ci	sco (Bo	ugh	C)	—— т. Т			T. Perm	1an	· · · · · · · · · · · · · · · · · · ·	—— Т.		
	•	6	-,							—— Т.		
No 1	fmam.		5/15!		54411	IL OR GAS	SANDS	OR ZO	NES			
110. 1,	110111				.to2441(	1111	No. 4, fr	om	***************	*************	10	*****
No. 2,	from		***************************		.to		No. 5 for	***		10	to	
N- 0	,						210. 5, 110	/LL1		************	to	
No. 3,	irom	••••			.to	*****************	No. 6, fre	m		*************	to	
No. 2,	from	••••••		*************	toto		*************	•••••••	feet.	•		*******
No. 4,	from	••••••			to				feet.			
				F	ORMATION REC	ORD (Attach o	additional	sheets i	f necessor	······································	***************************************	
	<del></del>		Thickness	··		······	·· ·· · · · · · · · · · · · · · · · ·		7	,,, <u>,</u>	* ***	
Froi	m I	`o	in Feet		Formation		From	To	Thickness in Feet		Formation	
	_1			·								

All distances must be from the outer boundaries of the Section.

Operator	erator Lease					Well No.			
DOME PETROI	LEUM CORPORATI	EON	Santa Fe-Leggs			2			
Unit Letter	Section	Township		lange	County				
N	11	21N	ŀ	10W	San J	uan			
Actual Footage Loc	ation of Well:				1				
990	feet from the Sc	outh line and	231	۵ (۵	et from the	West /	11 .		
Ground Level Elev.	Producing Form		Pool	16	et trom the	<del></del>	line cated Acreage:		
6379	Fnt	rada		Leggs Ent	rada	/	10		
1 0 1: 1			11. 1						
	<ol> <li>Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.</li> <li>If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working</li> </ol>								
interest ar	id royalty).						•		
3. It more that dated by c	on one lease of di ommunitization, u	itterent ownership is nitization, force-pooli	dedica ing. etc	ited to the well,	have the	interests of all	owners been consoli-		
Yes Yes	No If an	swer is "yes;" type o	of cons	olidation		-			
If answer in this form in	is "no," list the o	owners and tract desc	ription	ns which have a	ctually be	een consolidated.	(Use reverse side of		
,		d to the well until al	lintere	ests have been	consolida	ted (by communi	tization, unitization,		
forced-pool	ing, or otherwise)	or until a non-standar	d unit,	eliminating suc	h interes	ts. has been anni	roved by the Commis-		
sion.			•	8		, neo zoon upp	the commis-		
						. 1			
	1			!		CE	RTIFICATION		
				1					
				i		I hereby certify	that the information con-		
	. •					1	s true and complete to the		
<b>!</b>	l			•	İ	1 -	vledge and belief.		
				i	-	1 0/9 1/			
	1			1		Le Ke	naly		
	- +	L		· · · · · · · · · · · · · · · · · · ·	Ī	Name	Y		
	•		-	-1		Area Mana	ger		
	4			1	İ	Position K &	A, Inc.		
	•	•		!	İ	Minerals	Management		
		ĺ		!	į	Company			
	1			1		May 12, 1	978		
	1			1	:	Date			
	1			i I			·		
<b> </b>	3	ec		<del>- i</del>					
1	1	11		i					
ļ	1			i		I hereby certif	y that the well location		
	1			1		shown on this p	lat was plotted from field		
	ļ.			ĺ		notes of actual	surveys made by me or		
	į			1		under my super	vision, and that the same		
	!			i		is true and co	rrect to the best of my		
					<u>,  </u>	knowledge and l	belief.		
<u> </u>	· <del>-    </del>	<del></del>		<del> </del>	-/				
2310	o: 🐧			ŀ	1				
	1	Y 🔝		1		Date Surveyed			
		_		1	1	May 10	979		
	1	1066		i		Registered Factor	slond Angleer		
	D.	ŏ 📗	¥ .	1		and/or 1 fand Eur ve	XOVE THE		
				ŀ		I de alle	7X2124		
L				_i		Fred B2K	err Jr		
					إحصم	Certificate No. 6	0/1		
0 330 660 9	0 1320 1650 1980	2310 2640 2000	150	00 1000 <b>5</b>	 00 0	3950 750	'NET' Q.		
						- A 4	KERR.		

NO. OF COPIES RECEIVED	7						
DISTRIBUTION		NEW	MEXICO OU CONS	TOVATION COMMIS		30-	095-2305
SANTAFE	7	NEW	MEXICO OIL CONSE	SION	Form C+101 Revised 1-1-		
FILE							e Type of Lease
U.S.G.S.	2					STATE	
LAND OFFICE						L. '	& Gas Lease No.
OPERATOR	2						G G/15 /_ E0/150 [40].
·			·			TITIT	mmmm
APPLICATIO	N FOR PE	RMIT TO	DRILL, DEEPEN,	OR PLUG BACK			
	_					7. Unit Agre	eement Name
b. Type of Well DRILL X			DEEPEN 🗌	PLL	IG BACK		
	1					8. Furm or 1	ease Name
3. Name of Operator	о∵н	ER		ZONE X	ZONE	Santa	Fe Leggs
	Comm					9. Well No.	
Dome Petroleum  3. Address of Operators V	Corp.	- M				2	
3. Address of Operators K &	A, inc.	Minei	rais Manageme	ent,	0.7.4.0.3	10. Field ar	nd Pool, or Wildcat
501 Airport Dri 4. Location of Well	ve, sui	.ce 10:	o, rarmingto	n, New Mexic	0 8/401	Leggs	Entrada /
UNIT LETTI	ER N	Loc	ATED 990 ,	FEET FROM THE SOUT	th LINE		
AND 2310 FEET FROM	THE Wes	t	E OF SEC. 11	21 M	100		
THINTINI III	iinnii.	imm		WP. 21N RGE.	10W NMPM	12. County	milliti
		///////				San Ju	2011
	111111	HHH	HHHHH	<del>/////////////////////////////////////</del>	HHHH	777777	
	HHH	HHH.	<del>/////////////////////////////////////</del>	9. Proposed Depth	19A. Formation	7777777	20. Rotary or C.T.
	///////			5800	Entrad		Rotary
1. Elevations (Show whether DF,	RT, etc.)	21A. Kind	& Status Plug. Bond	21B. Drilling Contracto			. Date Work will start
		State		4-Corners I			1,-1978
23,		В	POPOSED CASING AND			1	
			ROPOSED CASING AND	CEMENT PROGRAM			
SIZE OF HOLE	SIZEOF		WEIGHT PER FOOT	SETTING DEPT	H SACKS OF	CEMENT	EST. TOP
13 1/4"	9 5	8"	3	200	2	00	Surface
8 3/4"	7		20 & 23	6500	1000(2	stage	) Surface -
		,					
Operator propos	05 <b>+</b> 0 3	- 11:ما	, 				
Operator propose	bo dot	TITI 9	in Entrada te	est to the d	lepth of	5800'.	
Completion will	pe det 27 will	bo no	ed from logs.	A series	900 (300	0 psi	WP)
blowout preventsurface pipe.	ST MTTT	. De us	sed during di	cilling oper	ations b	elow	
bullude pipe.							
		•					<del></del>
						Ar Area Server William	and the second s
					و		
	•				/		
• , , , •	8-13	3- 78			1		
[N.C. 44]			ere term				
					/	A	
					V <sub>2</sub>		7 3 8
							are a series of the series of
ABOVE SPACE DESCRIBE PROVE ZONE. GIVE BLOWOUT PREVENTE	DPOSED PRO	GRAM: IF P	ROPOSAL IS TO DEEPEN OF	PLUG BACK, GIVE DATA	ON PRESENT PRO	DUCTIVE ZONE.	AND PROPOSED NEW PRODUC-
ereby certify the the information	n,above is tru	e and comp	lete to the hest of mir !	owledge and ball-6			
ereby certify that the information		- 50mpi	K & A, 1	nc. Mineral	s Manage	ment	
ned Kind	1		Title Area Mar	ager	Γ.	ate May	12, 1978
(This space for S	one III						
/			The many time.				
PROVED BY SALAS	(Kan	_	heapting Oil 2017	AMPERIAL NOT	<i></i> <b>≇</b> 3	`	
NOITIONS OF APPROVAL, IF	- wy		TITLE		D	A T E	<del></del>
TOTAL OF APPHOVAL, IF	ANY:						_ <del></del>

NO. OF COPIES RECEIVED	Form C -103
DISTRIBUTION	Supersedes Old
SANTA FE / . NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE	-10-2-10-10-10-10-10-10-10-10-10-10-10-10-10-
U.S.G.S.	5a. Indicate Type of Lease
LAND OFFICE	State Fee X
OPERATOR 4	5. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
1.	7. Unit Agreement Name
OIL X GAS WELL OTHER-	
2. Name of Operator	8. Farm or Lease Name
Dome Petroleum Corp.	Santa Fe Leggs
3. Address of Operator	9. Well No.
501 Airport Drive, Suite 107, Farmington, New Mexico 87401	. 2
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER N . 990 FEET FROM THE SOUTH LINE AND 2310 FEET	Leggs Entrada
THE AND	
THE West LINE, SECTION 11 TOWNSHIP 21N RANGE 10W	NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
6379 G.L.	San Juan
Check Appropriate Box To Indicate Nature of Notice, Report o	r Other Data
	JENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB	]
OTHER Spud & set s	urface casing x
OTHER	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, included work) SEE RULE 1103.	luding estimated date of starting any proposed
<b></b>	
7/4/78 Spudded $12-1/4$ " hole at 8:00 p.m. $7/4/78$	
7/5/78 Ran 4 joints (183') $9-5/8$ " O.D., $32.3%$ , H-40, ST&C	
Set at 195' K.B. Cemented with 150 sx Class B ceme	
2% CaCl. Plug down at 6:00 a.m. 7/5/78. Circulate	d cement
	and the second second second second
	- 1 - 2 - 5 4 197 <b>9</b>
	CIL DOM: COM: /
	gist. 3
18. I hereby certify that the information phove is trug and complete to the best of my knowledge and belief.	
$-\alpha \wedge M$	·
T. ( Small - IX)	7///70
STIGNED TITLE Drilling & Production	DATE7/6/78
Superintendent	
Original Class SUPERVISOR DIST, you	
APPROVED BYTITLE	DATE

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TABULATION OF DEVIATION TEST DOME PETROLEUM CORP. SANTA FE-LEGGS #2 SAN JUAN COUNTY, NEW MEXICO N-11-21N-10W

DEVIATION	DEPTH
3/4°	207'
1/2 <sup>0</sup>	720'
3/4 <sup>0</sup>	1282'
ı°	1721'
1 3/4 <sup>0</sup>	2260'
ı°	2720'
ı°	3267 †
3/4 <sup>0</sup>	3797 <b>'</b>
3/4 <sup>0</sup>	4329'
ı°	4823'
1/20	5632'
	1970
	OIL COM. COM.
IDAVIT	0131.

## AFFI

This is to certify that the above deviation tests are correct to the best of my knowledge.

Drilling & Production Supt.

Subscribed and sworn to before me this first day of August, 1978.

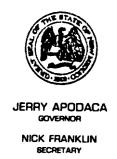
My commission expires: May 12, 1980

NO. OF CHPIES REC	EIAED	15	
DISTRIBUTIO	DN		
SANTA FE	/		
FILE	17		
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	1		
TAAM ON TEN	GAS		
OPERATOR			
PRORATION OF			

# NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Elinctive 1-1-65

FILE	.—	AND	CHACHAA 1-1-02
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURA	AL GAS ( )
LAND OFFICE			
TRANSPORTER OIL			18.
GAS			γ~
OPERATOR 2			
PRORATION OFFICE			
Operator Domo Pot nolo	um Conn	•	
Dome Petrole		·	
	Drive, Suite 107		
Farmington,			· · · · · · · · · · · · · · · · · · ·
Reason(s) for filing (Check proper	•	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	OII Dry C	<b>75</b> 1	
Change in Ownership	Casinghead Gas Conde	ensate	
Make of suspending sive non-			
If change of ownership give nar- and address of previous owner_	-		
•			
DESCRIPTION OF WELL AT			
Lease Name	Well No. Pool Name, Including F		
Santa Fe - Leggs	2 Leggs - E	ntrada State, Fe	ederal or Fee Fee
Location			
Unit Letter N ;;	990 Feet From The South Lin	ne and 2310 Feet F	rom The West
			_
Line of Section 11	Township 21N Range	10W , NMPM, S	an Juan county
•			
	ORTER OF OIL AND NATURAL GA	AS	
Name of Authorized Transporter of	<del></del> .	1	approved copy of this form is to be sent)
Permian Corporation	1	P.O. Box 1183, Houst	
Name of Authorized Transporter of	Casinghead Gas or Dry Gas	Address (Give address to which a	approved copy of this form is to be sent)
		<u> </u>	
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected?	When
give location of tanks.	N 11 21N 10W	NO	1
If this production is committed	with that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	with that from any other rease or poor,	g.vo commingg	
	Oll Well Gas Well	New Well Workover Deeper	n Plug Back   Same Res'v. Diff. Res'v.
Designate Type of Comple	etion $-(X)$		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
7/4/78	7/26/78	5632	5564
Elevations (DF, RKB, RT, GR, etc	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6379' GR	Entrada	5415	3019
Perforations			Depth Casing Shoe
54 <b>15 -</b> 5422			5584
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8", 32.3#	195'	150 sacks
8 3/4"	7", 23# & 20#	5584'	950 (2 stage)
	2 7/8", 6.5#	3019'	750 (12 3 3 2 7 )
	1 2 1/0 ; 0.5#	3019	
			1 - 1 1 1 1
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	ifter recovery of total volume of load epth or be for full 24 hours)	i oil and must be equal to or exceed top allow-
OII, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, go	as lift, etc.)
7/26/78	7/28/78	1 _	Control Barrer
	Tubing Pressure	Pumping Casing Pressure	Choke Size 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Length of Teet 24 hours	I daing Pleasant		
	OU BNIs	Water-Bbls.	Gae-MCF
Actual Pred. During Test 573 bbls	011-Выв.	511	
710 0019			
			OIL COIL
GAS WELL	The second of Table	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Tool-MCF/D	Length of Test	Esta, Condensate/MMCF	C. L
		Cooling December (m)	Choke Size
Testing kiethod (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	CHORA SIZA
		<u> </u>	<u>l</u>
CERTIFICATE OF COMPLIA	NCE	OIL CONSER	RVATION COMMISSION
		ll AU	1 1978
hereby certify that the rules or	d regulations of the Oil Conservation	APPROVED	, 19
Commission have been complied	i with and that the information given	By Original Signed	ny A. R. Kendrick
bove is true and complete to	the beat of my knowledge and belief.	BY Jane	ts 152 Out: 201
		TITLE SUPERVISOR	R DIST. 30
		11	1
91	•	This form is to be filed	in compliance with RULE 1104.
J. Arnold Smill (St	CB y Mary	If this is a request for a	illowable for a newly drilled or despended mpanied by a tabulation of the deviation
/J. Arnold Small (5)	gnatuje ji ili ili ili ili ili ili ili ili ili	tests taken on the well in a	ccordence with AULE 111.
Drilling & Wooducti	on Supt.	All sections of this form	must be filled out completely for allow-
,	Title)	able on new and recompleted	d wells.
August 1, 1978		Fill out only Sections	1. II, III, and VI for changes of owner.
	Dutel	Separate Fig. 8 C-104 :	porter, or other such change of condition.
	ţ	II Separate For a Co. 04 :	must be filed for each pool in multiply



# ENERGY AND MINERALS DEPARTMENT OIL CONSERVATION DIVISION

.

October 18, 1978

POST OFFICE BOX 2088 STATE LAND OFFICE BUILDIN SANTA FE, NEW MEXICO 875 (505) 827-2434

Dome Petroleum Corporation 501 Airport Drive, Suite 107 Farmington, New Mexico 87401

Attention: Mr. J. Arnold Snell

Administrative Order TX-60

### Gentlemen:

Reference is made to your request for an exception to the tubing setting requirements as contained in Division Rule 107 (d) (3) for the below-named well.

Pursuant to the authority granted me by Rule 107 (d) (4), you are hereby authorized to set tubing at 3019 feet in the following well:

LEASE NAME	WELL NO.	UNIT	S-T-R
Santa Fe-Leggs	2	N.	11-21N-10W

The Division reserves the right to rescind this authority in the event that waste appears to be resulting therefrom.

Very truly yours,

JOE D. RAMEY Division Director

JDR/DSN/og

cc: Oil Conservation Division 1000 Rio Brazos Road Aztec, New Mexico



		_		•
	NO. OF COPIES RECEIVED	/		
	DISTRIBUTION		ONSERVATION COMMISSION	Form C-104
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1). Elfoctive 1-1-65
	U.S.G.S.		AND	
	LAND OFFICE	AUTHORIZATION TO TRA	AND INSPORT OIL AND NATURAL O	AS R
	OIL		Įń.	MAR 1 4 1984 W PIST. 3 DIV.
	TRANSPORTER GAS		91	
	OPERATOR			MAD WE
l.	PRORATION OFFICE			" " " " " " " " " " " " " " " " " " "
	TEXACO Inc.,		- 12	CO. 1984 LU
	Address			D/N
	P. O. Box 2100	, Denver, Colorado 8	30201	131. 3 UV
	Reasor for filing (Check proper box)	1	Other (Please explain)	<del></del> ;
	New N.	Change in Transporter of:		
	Recompletion	OII Dry Ga	s	
	Change in OPERATOR X	Casinghead Gas Conder	sate	
	If change of ownership give name		3.605 - 3 -	
	and address of previous ownerD	ome Petroleum Corp.,	1625 Broadway, Deny	ver, Colorado
_	DESCRIPTION OF WELL AND			
I.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fi	ormation Kind of Lease	Lease Nc.
	SANTA FE LEGGS	2 LEGGS-EN	TRADA State, Federal	or Fee FEE
	Location			
	Unit Letter N : 99	O Feet From The SOUTH Lin	e and 23/0 Feet From T	he WEST
				•
	Line of Section // Tov	mship $Z/N$ Range	10W , NMPM, SAN	JUAN County
I.	Name of Authorized Transporter of Oil	FER OF OIL AND NATURAL GA	S   Address (Give address to which approv	ed copy of this form is to be sent!
	PERMIAN CORP.	<u> </u>		_
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	P.O. Box 1183, Houste Address (Give address to which approv	ed copy of this form is to be sent)
				:
	If well produces oil or liquids,	Unit   Sec. Twp. P.ge.	Is gas actually connected? Whe	n
	give location of tanks.	M 11 21N 10W	! 910	i
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:	
V.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty, Diff, Resty,
	Designate Type of Completio		New Well Workover Deepen	Plug Edck Same Resvt. Dim. Nesvt.
	Date Spudaea	Date Compl. Ready to Frod.	Total Depth	P.B.T.D.
	Date spaces			!
	Elevations (DF, Rhb, RT, GR, etc.)	Name of Froducing Formation	Top Cil/Gas Pay	Tubing Depth
	) 		<u> </u>	
	Perforations			Depth Casing Shoe
				<u> </u>
	: 	· · · · · · · · · · · · · · · · · · ·	CEMENTING RECORD	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
				:
		1		
ı'.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil a	and must be equal to or exceed top allow
	OIL WELL	able for this de	pth or be for full 24 hours)	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	i, e.c.,
	Length of Test	Tubing Pressure	Casing Program Is (in 1) Reg	Choke Size
			IN SEE IN	EM
	Actual Press During Test	C:1-Bbis.	Water-Bbis.	Gos-MCF
	•		MAY 0 71984	
		4		
	GAS WELL		OIL CON. DIV	
	Ac Ja. Proc. Test-MCF/C	Length of Test	Beis. Condensate/Mariof. 3	Gravity of Condensate
			1	
	Testing Wethod (pitot, back pt.)	Turing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size
		i	1	
1.	CERTIFICATE OF COMPLIANCE	CE	OIL CONSERVA	TION COMMISSION
			APPROVED MAY	N7/1984
	I hereby certify that the rules and r Commission have been complied w	egulations of the Oil Conservation it and that the information given		
	above is true and complete to the	best of my knowledge and belief.	BY	Jav 2/
	TEXACO Inc. as Opera	tor for Texaco Oils	Inc.	ISTRICT # 0
	-2		This form is to be filed in c	***
	(10 pm		I see at the land account for allow	able for a newly drilled or deepened
	Ahra R many	sture)	I this form must be accompan	ried by a tabulation of the deviation
	Field Supt.	•	tests taken on the well in accord	dance with RULE 111.  It be filled out completely for allow
	(7 11	1.	All sections of this form multiple able on new and recompleted we	lis.
	3-9-84		Till out only Sections ! !!	III and VI for changes of owner.
	(54	7.€ ·	well name or number, or transport	er, or other such change of condition.
			II CARACTA Forms C-104 must	be filed for each pool in multiply

Form C-104
Supersedes Old C-104 and C-110
Elfective 1-1-85

D NATURAL GAS

TO. OF COPIES REC	LIVED	1	1
DISTRIBUTION			NEW MEXICO OIL CONSERVATION CO
INTA FE			REQUEST FOR ALLOWABL
S.G.S. AND OFFICE			AND
			AUTHORIZATION TO TRANSPORT OIL AN
TANSPORTER	OIL		
TANS ON EN	GAS		
PERATOR			]
TORATION OF	FICE		

RANSPORTER GAS			•
PERATOR			
RORATION OFFICE			
rexaco inc.			·
P.O. Box EE, Cort	-az CO 81321		
son(s) for filing (Check proper bo		Other (Please expl	ain)
weil	Change in Transporter of:		transporter was Permian,
ompletion	Oil Dry Go Casinghead Gas Conder	[]	s Gary Energy Corp.
	Cashighed das Conden	issue	
ange of ownership give name address of previous owner			
CRIPTION OF WELL ANI	) I FASE		
se Name :	Well No. Pool Name, Including F		of Lease No.
nta Fe Leggs	2   Leggs - Ent	trada State	, Federal or Fee Fee
•	90' Feet From The South Lin	ne and 2310' Fe	et From The West
. *	21 N	1 0 -	
Line of Section 11 T	ownship ZIN Range	10W , NMPM, S	an Juan County
	RTER OF OIL AND NATURAL GA		
ne of Authorized Transporter of C		<b>.</b>	ch approved copy of this form is to be sent)
Gary Energy Corp  o of Authorized Transporter of C	asinghead Gas or Dry Gas	Address (Give address to whi	Dr., Englewood, CO. 80112 ich approved copy of this form is to be sent)
· .			
ell produces oil or liquids, clocation of tanks.	Unit Sec. Twp. P.ge. N 11 21N 10W	is gas actually connected?	, When
	vith that from any other lease or pool,	give commingling order num	ber:
Designate Type of Complet	ion - (X)	New Well Workover De	eepen Plug Back Same Res'v. Diff. Res'v.
e Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
a Spudded	Date compile result to result	Total Dopin	
rations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth .
foration <b>s</b>			Depth Casing Shoe
		CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
T DATA AND REQUEST	FOR ALLOWARIE (Test must be a	ter recovery of total volume of	load oil and must be equal to or exceed top allow-
WELL	able for this de	pth or be for full 24 hours)	, ·
First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pum	•
gth of Test	Tubing Pressure	Casing Pressure (2)	Choke Size
		lill	
ial Prod. During Test	Oil-Bbis.	Water-Bble. OCT2	0 1986 Gag-MCF
		l	N. U.V.
WELL			
ual Prod. Teet-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
ting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
TIFICATE OF COMPLIAN	NCE	OIL CON	SERVATION COMMISSION 1006
1			007 20 1380
nission have been complied	regulations of the Oil Conservation with and that the information given	APPROVED	80170
e is true and complete to the	ne best of my knowledge and belief.	BY	SUPERVISOR DISTACT # 3
		TITLE	
•	SIGNED A. R. MARX	This form is to be f	ited in compliance with RULE 1104.
(St.	natwe)	I wall this form must be a	for allowable for a newly drilled or despende accompanied by a tabulation of the deviation
AREA SUPERINTENI		tests taken on the well	in accordance with RULE 111.  form must be filled out completely for allow-
1'	îile)	able on new and recomp	leted wells.
10/10/86		Fill out only Section	one I, II, III, and VI for changes of condition.

40. 07 COPIES REC			
DISTRIBUTIO			
SANTA FE			
FILE			
U.S.G.5.			
LAND OFFICE			
TRANSPORTER			
THANS! ON EN			
OPERATOR			
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SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110
FILE U.S.G.S.	ALITHORIZA 71011 70 70	AND	Elfective 1-1-65
LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL (	GAS /
TRANSPORTER OIL			
GAS			
OPERATOR		/	
PROPATION OFFICE Operator			
TEXACO INC.			
Address			
Reason(s) for liling (Check proper	ortez, CO. 81321	Tanana and an analas and an analas and an analas and an analas and an analas and an analas and an analas and a	
New Well	Change in Transporter of:	Other (Please explain) Previous tran	sporter was Gary
Recompletion	Oil X Dry G	Energy Corp.,	now it is Giant
Change in Ownership	Casinghead Gas Conde		c.
If change of ownership give nam	e		
and address of previous owner_			
I. DESCRIPTION OF WELL AN			
Lease Name	Well No. Pool Name, Including F	_	20000 1101
Santa Fe Leggs	2 Leggs-Entr	ada State, Federa	for Fee Fee
	990' Feet From The South Lin	. 2310!	Wort
Unit Letter IN ;	Feet From the	ne and ZSTO Feel From	The West
Line of Section 11	Township 21N Range	10W , ммгм, San	Juan County
L DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL GA	A C	
Name of Authorized Transporter of	OII X or Condensate	Address (Give address to which appro-	red copy of this form is to be sent)
Giant Industrie		P. O. Box 9156, Pho Address (Give address to which appro-	oenix, AZ. 85068
Name of Authorized Transporter of	Casinghead Gas or Dry Gas	Address (Give address to which appro-	ved copy of this form is to be sent)
	Unit Sec. Twp. Pge.	Is gas actually connected? Who	en
If well produces oil or liquids, give location of tanks.	N 11 21N 10W	1	
If this production is commingled	with that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.
Designate Type of Comple		i i i i i i i i i i i i i i i i i i i	1 Same Res 1
Date Spudded	Date Compl. Ready to Prod.	Total Derth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.	,, Name of Producing Formation	Top O!1/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
		D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		<u> </u>	i
. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a able for this de	ifter recovery of total volume of load oil i epth or be for full 24 hours)	and must be equal to or exceed top allow-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li)	well to
			111 32 - 3 11 15
Length of Test	Tubing Pressure	Casing Pressure	Chore Size
Actual Prod. During Test	Oil - Bhis.	Water - Bbis.	Gge - MCF
Actual Floar Burning Feet			Oller
<u> </u>			11 11 11 11 11
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate
Actual Prod. 1001-MCF/D	Length of Lest	Bole. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIA	INCE	OIL CONSERVA	TION COMMISSION 30 198
		APPROVED	APH 30 130
Commission have been complied	id regulations of the Oil Conservation with and that the information given	8	29.6.
above is true and complete to	the best of my knowledge and belief.	BY	The state of the s
		TITLE	SUPERVISOR DISTURCE # 3
		This form is to be filed in c	ompliance with RULE 1104.
	N. A. A. SUEIGH	If this is a request for allow	able for a newly drilled or despened
	enature) Novembre Ernop	tests taken on the well in accor-	
AREA SUPERI	NTENDENT Title)		at be filled out completely for allow-
	PR 2 5 1987	Eith out only Sections I II	III. and VI for changes of owner,
	(Date)	well name or number, or transport	er, or other such change of condition.  be filed for each pool in multiply
		Separate Forms C-104 must	

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	SANTA FE						ATION COMM	ISSION		m C-104	
	FILE			-  *	EQUEST		LOWABLE			ersedes Old ective 1-1-65	C-104 and C-11
	U.S.G.S.			AUTHODIZATION		AND					
	LAND OFFICE			_ AUTHORIZATION	IOIRA	ANSPORT	OIL AND	IATURAL (	SAS	/	
	EXAD OFFICE	OIL	-	-					. /	,	
	IRANSPORTER	GAS		-							
	OPERATOR	1.07.0		=							
	PRORATION OF	ICE		╡							
1.	Operator							<del></del>	/		
	TEXACO	INC.									
	Address	-									
	P. O. B	ox 21	.00.	Denver, CO. 802	201						
	Reason(s) for filing						Other (Please	explgin)		·	
	New Well			Change in Transporter	of:		This_re	epørts o	change	of own	ership
	Recompletion			Oil	Dry Go	ıs 🗌		xaco II			exaco
	Change in Ownership	$\overline{\mathbf{X}}$		Casinghead Gas	Conde	isate 🔲	Product.	ng Inc.	•		<b>—</b>
	<b>L</b>										
	If change of owners and address of prev			Texaco Oils Inc	E., P.	O. B	ox 2100,	Denver	. CO.	80201	<del></del>
II.	DESCRIPTION O	F WELI	LAND	LEASE Well No. Pool Name, I	ncluding F	ormation		Kind of Lease	<del></del>	<del></del>	Lease No.
	Santa Fe	Leaa	S	2 Leggs		_		State, Federa	_	Fee	
	Location			1 -0990			l		•		
	Unit Letter N	<u> </u>	:9	90 Feet From The SOU	th Lin	e and 23	10	_Feet From 1	rhe Wes	st	
	Line of Section	11_	То	waship 21N	Range 1	.0W	, имрм,	San Jua	an	·	County
111	DESIGNATION OF	E TRAN	SPOR	TER OF OIL AND NATU	IRAI GA	c					
414.	Name of Authorized	Transport	er of Oi	or Condensate			Give address t	which approx	ed copy of th	is form is to	be sent)
	Giant Ref			_		P.O.	Box 91	56, Pho	oenix.	AZ 85	068
				singhead Gas or Dry G	as [ ]	4	Give address t				
				_							
	If well produces oil	or Hawida		Unit Sec. Twp.	P.ge.	ls gas ac	tually connecte	d? Whe	n	-	
	give location of tank		•	NN 11 21N	110W	1		į			
	If this production is	commin	gled wi	th that from any other lease	e or pool.	give comm	ningling order	number:		····	
	COMPLETION DA										
	Designate Typ	e of Co	moleti		Gas Well	New Well	Morkover	Deepen	Plug Back	Same Res	. Diff. Restv.
			mpreti	<u> </u>		\ <del>\</del>		<u> </u>	<del> </del>	1	<u> </u>
	Date Spudded			Date Compl. Ready to Prod.		Total De	oth		P.B.T.D.		
	51					T- 011 (	n		T>4 D	41-	
	Elevations (DF, RKB	, RT, GR	l, etc.j	Name of Producing Formation	n	Top Oil/0	Jas Pay		Tubing Dep	tn	
	Perforations			<u> </u>		i			Depth Cast	ng Shoe	
	Periorations									•	
				TUBING, CAS	ING. AND	CEMENT	ING RECOR	<u> </u>	1		
	HOLE	SIZE		CASING & TUBING		1	DEPTH SE		S/	CKS CEME	NT
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										io.	
v	TEST DATA AND	PEOU	EST E	OR ALLOWABLE (Test	must be at	ter recover	y of total volun	e of load oil o	ind shadt be a	oud to disex	ceed top allow-
٠.	OIL WELL	, III do					or full 24 hours,		411	1 1/2 1	RA
ĺ	Date First New Oil R	lun To To	ink s	Date of Test		Producing	Method (Flow,	pump, gas lif	t, etc.)	ີ	V F M
						L			<i>J()</i>	N2,	~ //
	Length of Test			Tubing Pressure		Casing P	ressure		Choke Size	~ 6 /98	$\sim  U $
							1-		C== 110=		
	Actual Prod. During	Test		Oil-Bbls.	•	Water-Bb	10.		Gas-MCF	J. 4 D	4.
				L		l		<del> </del>		9j. g 💙	C 12.7
										-	2
r	GAS WELL	CE #		I enote of Test		Bhie Co	densate/MMCF		Gravity of C	Condensate	·
	Actual Prod. Test-M	ICF/D		Length of Test		BUIS. COP	Menedie/ MMCF				
		Acab c		Tubing Bearing ( stud ) = 1	1	Castes B	essure (Shut-	(a)	Choke Size		
	Testing Method (pito	i, back pr	•/	Tubing Pressure (Shut-in	,	Cusing Pi	ma ( puer.	,	CHORE SIZE		
L				<u></u>	<del></del>	<u> </u>				# # CO! C : :	
VI.	CERTIFICATE O	F COMI	PLIAN	CE			OIL C	ONSERVA			
							\\E5	JU	N 26 19	187 .	9
	I hereby certify that	the rule	e and	egulations of the Oil Cons	ervation	APPRO	.VED		. 1	· '	
	commission have be bove is true and o	een com complete	to the	vith and that the informati best of my knowledge an	d belief.	BY		دمنط	- Q/_	<del></del>	
		-		nerator for		Į.		•	_	Ō	

TEXACO INC. As Operator TEXACO PRODUCING INC.

-		***		
SIGNE	D:	Α.	A.	KLEIBA

	(Signature)
	AREA SUPERINTENDENT
	(Title)
•	

(Date)

SUPERVISION DISTRICT # 5

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.

Revised 1-1-89 See Instructions at Bottom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico: 87504-2088

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

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							Wel	API No.		
TEXACO INC.										
3300 N. Butler, Farm	ington.	NM 87	7401							
Reason(s) for Filing (Check proper box	r)				Ou	net (Please exp	lain) Pre	vious tr	ansport	er was
New Well			in Transpo	_	G	iant Ind	ustries	Inc., n	low it is	3
Recompletion	Oil		Dry Ga							10/01/89.
Change in Operator	Casingho	ad Gas	Conde	sate [						
If change of operator give name and address of previous operator										
II. DESCRIPTION OF WEL	L AND LE	EASE								
Lease Name		Well No.	Pool N	ame, Includ	ling Formation		Kind	of Lease Fee	e L	ease No.
Santa Fe Leggs		2	Legg	s-Entr	ada		State	, Federal or Fe	æ	
Location										
Unit LetterN	:990	<u> </u>	_ Feat Fr	om The $\frac{S}{}$	Lin	e and _2310	· · I	est From The	W	Line
Section 11 Town	ship 21N	<u> </u>	Range	1	N, WO	мрм, San	Juan			County
III DECICNATION OF TO	Nenona	SD OF O		D 314777						
III. DESIGNATION OF TRA		or Coade		DNATU		e address to wi	hich approve	d copy of this f	form is to he ea	·=()
Meridian Oil Company	XX				1			gton, NM		54)
Name of Authorized Transporter of Cas	inghead Gas		or Dry	Gas 🗍	Address (Giv	e address to wi	hich approve	d copy of this f	0/499	
			,		1		-u, epp on	a copy of may	OF IN LA DE SE	inu)
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge	is gas actuali	y connected?	Whe	a ?		
<u></u>	<u>N</u>	111	21N	1 10W		NO.				
If this production is commingled with th IV. COMPLETION DATA	at from any ou	ner lease or	pool, giv	е сопшпий	ing oner num	per:				
D. J. and T. and G. Maria	90	Oil Well	1   0	as Well	New Well	Workover	Doepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completio		pl. Ready to	a Pand		Total Depth	L	l	1	Ĺ	<u> </u>
Date Spatial	Date Com	pi. Keaty u	o Piod		I da Depai			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of F	roducing Fo	omation		Top Oil/Gas I	ъзу		Tubing Depth		
Perforations					<u> </u>			Depth Casin	g Shoe	
:	•								g Silve	
		TUBING.	CASIN	IG AND	CEMENTI	NG RECOR	D			
HOLE SIZE	CA	SING & TU	JBING S	ZE		DEPTH SET		S	ACKS CEME	NT
	<del></del>							-		
		<del></del>					<del></del>	<del> </del>	<del></del>	
V. TEST DATA AND REQUE	ST FOR A	LLOWA	ABLE		<u> </u>			ك موادي ميسمون	The first	£ 1.5 0
V. TEST DATA AND REQUE OIL WELL (Test must be after	recovery of to	ital volume	of load oi	l and must	be equal to or	exceed too allo	wable for thi	steph on be for	oc full 24 Nove	ン - 12 <b>+ 3</b> - 13 - 1
Date First New Oil Run To Tank	Date of Te				Producing Me	thod (Flow, pur	np, gas lift, i	ue.)\\	2-)	
						•			D 2 8 198	29
Length of Test	Tubing Pre	ssure			Casing Pressur	e		Choke Size	<del></del>	
								OIL	CON.	∨ اليا
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas-MCF	DIST. 3	
GAS WELL			<del></del>					<u> </u>	<del></del>	
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Condens	ate/MMCF		Gravity of Co	ondensate	
Testing Method (pitot, back pr.)	Tubing Pre	saure (Shut-	·in)		Casing Pressur	e (Shut-in)	· · · · · ·	Choke Size	_ N	
UL OPER ATOR CERTIFIC	7477 05	CO) M		7.			-		مستا مملك موادوس	-
VI. OPERATOR CERTIFIC				JE		III CON	SEDV	ATION E		k.i
I hereby certify that the rules and regularising have been complied with and						IL CON	OLITY/	A I ION L		IX
is true and complete to the best of my		•	11 200,46				•			
·	_			İ	Date	Approved	·	CED 90	1000	<del></del>
SIGNED: A. A. KLEIER					By		_	SEP 28	1989	
Signature		Ares	Mana	oor	Dy		3	7 8		
Printed Name SEP 2 b 1989			Title	<del></del>	Title_		SUPERV	ISION DI	8 Sthict 4	4-7
Date		Telep	phose No.					- •		
		· · · · · · · · · · · · · · · · · · ·			<u> </u>					

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 with Rule 111.
- 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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.



### STATE OF NEW MEXICO

## ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION

GARREY CARRUTHERS
GOVERNOR

September 21, 1990

POST OFFICE BOX 2088 STATE LAND OFFICE BUILDING SANTA FE, NEW MEXICO 87504 (505) 827-5800

Sonto de Lago #2

A.P.A. Development Inc. P. O. Box 215

Cortez, Co. 81321

Attention: Patrick B. Woosley

Re: \$7,500 One-Well Plugging Bond

A.P.A. Development, Inc., Operator 2310' FWL and 990' FSL of Sec. 11, ✓ T-21-N, R-10-W, San Juan County

Bond No. OCD-246

Dear Mr. Woosley:

The Oil Conservation Division hereby approves the above-captioned one-well plugging bond effective this date.

Sincerely,

WILLIAM J. LEMAY

Director

dr/

cc: Oil Conservation Division Aztec, New Mexico

DECE 1980 SEP 2 6 1990

# NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

FILE	-	AND	Effective 1-1-65					
U.S.G.S.	_ AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (	GAS '					
LAND OFFICE								
TRANSPORTER GAS								
OPERATOR	7		DECEIVED					
PRORATION OFFICE								
A.P.A. Development	Inc.	··············	JAN 0 3 1990					
P.O. Box 215, Cortez	. CO 81221		OIL CON. DIV.					
Reason(s) for filing (Check proper bo		Other (Please explain)	DIST. 3					
New Well	Change in Transporter of:							
Recompletion	Oil Dry Go Casinghead Gas Conde	<del>                                      </del>						
Change in Ownership X	Cdsindredd Gds Conde	nsdie 🔛						
If change of ownership give name and address of previous owner	Texaco Inc., P.O. Box 21	00, Denver, CO 80201						
I. DESCRIPTION OF WELL AND								
Lease Name	Well No. Pool Name, Including F	State Federa	N and Read of the Control of the Con					
Santa Fe Leggs 2 Leggs-Fntrada State, rederd of ree Fee								
Unit Letter N ; 99	Unit Letter N : 990 Feet From The South Line and 2310 Feet From The West							
Line of Section 11 To	wnship 21N Range 1	OW , NMPM, San .	Iuan County					
I DOGGOVANIAN AND MARKET	THEN ON OUT AND MARKINGS.							
Name of Authorized Transporter of Ol	TER OF OIL AND NATURAL GA	Address (Give address to which appro-	ved copy of this form is to be sent)					
Giant Refinery		P.O. Box 9156, Phoenis	AZ 85068					
Name of Authorized Transporter of Ca	isinghead Gas or Dry Gas	Address (Give address to which appro-	ved copy of this form is to be sent)					
to all and and all and and a	Unit Sec. Twp. P.ge.	Is gas actually connected? Who	Pn .					
If well produces oil or liquids, give location of tanks.	N 11 21N 10W							
· ·	ith that from any other lease or pool,	give commingling order number:						
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.					
Designate Type of Completi		<u> </u>						
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations		1	Depth Casing Shoe					
	TUBING, CASING, AND	CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
			-					
			1					
. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a		and must be equal to or exceed top allow-					
OII, WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours)  Producing Method (Flow, pump, gas lif	(t, etc.)					
		BEREINER						
Length of Test	Tubing Pressure	Chotta Planeline	Choke Size					
Actual Prod. During Test	Oil-Bbls.	Wate SEP 2 4 1990	Gas - MCF					
	Oil-Bhis.	OIL CON. DIV.	Gas - MCF					
GAS WELL		OIL CON. DIV.						
GAS WELL Actual Prod. Test-MCF/D	Length of Test	OIL CON. DIV.	Gravity of Condensate					
GAS WELL		OIL CON. DIV.						
GAS WELL Actual Prod. Toet-MCF/D	Length of Test  Tubing Pressure (Shut-in)	OIL CON. DIV.  Bbls. Condendate/MMCF  Casing Pressure (Shut-in)	Gravity of Condensate					
GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIAN  I hereby certify that the rules and	Length of Test  Tubing Pressure (Shut-in)  CE  regulations of the Oil Conservation	OIL CON. DIV.  Bbls. Condendate/MMCF  Casing Pressure (Shut-in)	Choke Size TION COMMISSION					
GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIAN  I hereby certify that the rules and Commission have been complied	Length of Test  Tubing Pressure (Shut-in)	OIL CON. DIV.  Bbls. Condend to MMCF  Casing Pressure (Shut-in)  OIL CONSERVA  APPROVED SEP 2	Choke Size TION COMMISSION					
GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIAN  I hereby certify that the rules and Commission have been complied	Length of Test  Tubing Pressure (shut-in)  CE  regulations of the Oil Conservation with and that the information given	OIL CON. DIV.  Bbls. Condendate/MMCF  Casing Pressure (Shut-in)  OIL CONSERVA  APPROVED SEP 2  BY	Choke Size  TION COMMISSION 7 1990 , 19					
GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIAN  I hereby certify that the rules and Commission have been complied	Length of Test  Tubing Pressure (shut-in)  CE  regulations of the Oil Conservation with and that the information given	OIL CON. DIV.  Bbls. Condend to / MMCF  Casing Pressure (Shut-in)  OIL CONSERVA  APPROVED SEP 2  TITLE This form SUPERMINITED	Choke Size  Choke Size  TION COMMISSION  7 1990 , 19  Chipilance with Rule 1104.  able for a newly drilled or deepened					
GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIAN  I hereby certify that the rules and Commission have been complied above is true and complete to the	Length of Test  Tubing Pressure (shut-in)  CE  regulations of the Oil Conservation with and that the information given	OIL CON. DIV.  Bbls. Condendate/MMCF  Casing Pressure (shut-in)  OIL CONSERVA  APPROVED SEP 2  TITLE This form SUPERMINING  If this is a request for allow well this form must be accompared.	Choke Size  Choke Size  TION COMMISSION  7 1990 , 19  Chipitalic with Rule 1104.  Shipitalic with Rule 1104.  Shipitalic with Rule 1104.					
GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIAN  I hereby certify that the rules and Commission have been complied above is true and complete to the Complete to the Complete Struck Complete Str	Length of Test  Tubing Pressure (Shut-in)  CE  regulations of the Oil Conservation with and that the information given best of my knowledge and belief.	OIL CON. DIV.  Bbls. Condendate/MMCF  Casing Pressure (shut-in)  OIL CONSERVA  APPROVED SEP 2  BY  Title This form SUPERMINING  If this is a request for allow well, this form must be accomparted to taken on the well in accompanies taken on the well in accompanies.	Choke Size  Choke Size  TION COMMISSION  7 1990  A 19  Chipitalic with Rule 1104.  The for a newly drilled or deepened nied by a tabulation of the deviation dence with RULE 1111.  The filled out completely for allow-					
GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIAN  I hereby certify that the rules and Commission have been complied above is true and complete to the Complete to the Complete Struck Complete Str	Length of Test  Tubing Pressure (Shut-in)  CE  regulations of the Oil Conservation with and that the information given a best of my knowledge and belief.	OIL CON. DIV.  Bbls. Condendate/MMCF  Casing Pressure (shut-in)  OIL CONSERVA  APPROVED SEP 2  TITLE This form SUPERMINITIAL  If this is a request for allow well, this form must be accompared tests taken on the well in accompanies taken on new and recompleted we able on new and recompleted we	Choke Size  Choke Size  TION COMMISSION  7 1996 , 19  Chipitatic with Rule 1104.  able for a newly drilled or deepened lied by a tabulation of the deviation dence with Rule 111.  at be filled out completely for allow-lie.					
GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIAN  I hereby certify that the rules and Commission have been complied above is true and complete to the Sign Rycs. A-PA.  (Sign Rycs. A-PA.  (Ti	Length of Test  Tubing Pressure (Shut-in)  CE  regulations of the Oil Conservation with and that the information given best of my knowledge and belief.	OIL CON. DIV.  Bbls. Condend to / MMCF  Casing Pressure (Shut-in)  OIL CONSERVA  APPROVED SEP 2  TITLE This form SUPERMINITED If this is a request for allow well, this form must be accompartests taken on the well in accompanies to the series on new and recompleted we Fill out only Sections I. II. well name or number, or transport.	Choke Size  Choke Size  TION COMMISSION  7 1990  A 19  Chipitalic with Rule 1104.  The for a newly drilled or deepened nied by a tabulation of the deviation dence with RULE 1111.  The filled out completely for allow-					