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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION 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-110
Effective 1-1-65

I.

Operator Kenai Oil and Gas Inc.	
Address 717 17th Street, Ste. 2000, Denver, CO 80202-3373	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State of New Mexico-16	Well No. 21	Pool Name, Including Formation Nageezi-Gallup Ext.	Kind of Lease State, XXXXXX	Lease No. LG-3926
Location				
Unit Letter C	890	Feet From The North	Line and 1920	Feet From The West
Line of Section 16	Township 23N	Range 8W	, NMPM, San Juan 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"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) 4775 Indian School Rd., NE, Albuquerque, NM 87110	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Gas Company of N.M. (Div of Southern Union)	Address (Give address to which approved copy of this form is to be sent) 1800 1st International Bldg., Dallas, TX 75270	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 16
	Twp. 23N	Rge. 8W
Is gas actually connected?		When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4/30/81	Date Compl. Ready to Prod. 6/17/81	Total Depth 5508'KB		P.B.T.D. 5463'KB				
Elevations (DF, RKB, RT, GR, etc.) 7013'GL; 7026'KB	Name of Producing Formation Lower & Upper Gallup	Top Oil/Gas Pay 5398-5216'; 5178-5071'		Tubing Depth 5407.03'KB				
Perforations 5398-5312' (25 holes); 5281-16' (13 holes); 5178-06' (30 holes) 5095-71' (12 holes).		Depth Casing Shoe 5508'KB						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8"	259'KB		275 SXS				
7-7/8"	5-1/2"	5508'KB		1125 SXS				
	2-3/8"	5407.03'KB						

V. 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 6/10/81	Date of Test 6/16/81	Producing Method (Flow, pump, gas lift, etc.) Flow and swab	
Length of Test 12 hrs.	Tubing Pressure	Casing Pressure 290 psi.	Choke Size
Actual Prod. During Test	Oil-Bbls. 63	Water-Bbls. 42	Gas-MCF 400

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. 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.


(Signature)

Manager of Operations
(Title)

10/29/81
(Date)

OIL CONSERVATION COMMISSION
NOV 5 - 1981

APPROVED _____, 19

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

TITLE _____

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.