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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

B.R.

API 30-039-21816

Operator RESOURCES INVESTMENT CORPORATION	
Address Suite 3500, Anaconda Tower, 555 Seventeenth Street, Denver, Colorado 80202	
Reason(s) for filing (Check proper box)	Other (Please explain)
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"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Escrito Federal	Well No. 1	Pool Name, including Formation Escrito Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. NM 33039
Location Unit Letter <u>M</u> ; <u>790</u> Feet From The <u>South</u> Line and <u>790</u> Feet From The <u>West</u> Line of Section <u>26</u> Township <u>24N</u> Range <u>7W</u> , NMPM, <u>Rio Arriba</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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit 26	Sec. 24N
	Twp. 7W	Rge.
	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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-26-78	Date Compl. Ready to Prod. 11-17-78	Total Depth 5825'	P.B.T.D. 5765'					
Elevations (DF, RKB, RT, GR, etc.) 6986' KB	Name of Producing Formation Gallup Formation	Top Oil/Gas Pay Oil 5653'	Tubing Depth 5620'					
Perforations 5653-5661' & 5668-5670'			Depth Casing Shoe 5825'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8" casing	254'	145 sxs Class "G"					
7-7/8"	4-1/2" "	5825'	260 sxs 50-50 Pox thru					
	2-3/8" Tubing	5620'	shoe 8450 sxs Lite &					
			50 sxs "G" thru DV collar					

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 11-18-78	Date of Test 11-18-78	Producing Method (Flow, pump, gas lift, etc.) Plunger Lift	
Length of Test 24 hours	Tubing Pressure 0 to 700 psi	Casing Pressure 420 to 700 psi	Choke Size
Actual Prod. During Test	Oil-Bbls. 12	Water-Bbls. 0	Gas-MCF 63

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.

Debra Louise Huntington
Debra Louise Huntington
Operator
11/21/78

OIL CONSERVATION COMMISSION	
APPROVED	FEB 21 1979
BY	Original Signed by A. R. Kendrick
	SUPERVISOR DIST. #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 taken on the well in accordance with rule 111.
All sections of this form must be filled out completely for effect.
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