DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104				
SANTA FE	REQUEST FOR ALLOWABLE AND			Supersedes Old C-104 and C-11 Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TRA		VATURAL GAS		
LAND OFFICE					
TRANSPORTER GAS	4				
OPERATOR					
Operation OFFICE	<u> </u>				
KEN BLACKFO	RD				
P. O. Box 1	08, Lubbock, Texas 7	79408		·	
Reason(s) for filing (Check proper box)		Other (Please	explain)		
New Well Recompletion	Change in Transporter of: Oil Dry Go	as [
Change in Ownership	Casinghead Gas Conde	7			
If change of ownership give name					
and address of previous owner					
DESCRIPTION OF WELL AND					
Lease Name Tioprilla 27 /	Well No. Pool Name, Including F 7 Ballard Kpc		Kind of Lease State, Federal or	r. Indian	17-B
Jicarilla 37 B			1) <i>)</i>
Unit Letter "F" : 145	5 Feel From The West Lir	ne and 2073	Feet From The	North	
Line of Section 24 Tow	wriship 24 N Range	5 W , NMPM	, Rio Arri	iba	County
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oll		AS Address (Give address	to which approved i	copy of this form is to	be sent)
Name of Authorized Transporter of Cas El Paso Natural Gas		P.O.Box 990			
li well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connect		JOIL, N.M. C	7401
give location of tanks.		no	Į.		
If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	give commingling orde	number:		
Designate Type of Completio	$\operatorname{On} = (X)$ Gas Well X	New Well Workover	Deepen Pl	ug Back Same Res	v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P	B.T.D.	
11-18-80	11-29-80	2655		2620	
Elevations (DF, RKB, RT, GR, etc.)		Top Otl/Gas Pay	T	ubing Depth	· ·
6641 GL	Kpc 20 20 20 Chr.	2408	71.00 00 D	2485 epth Casing Shoe	
all @ 1 hole/foot:	-28, 2432-38, 2456-7 2476-80 @ 2 holes/fo	72, 24/4-70, oot	2400-02	2642	
		D CEMENTING RECOR	D		
HOLE SIZE	CASING & TUBING SIZE	DEPTH S	ΞT	SACKS CEM	ENT
12-1/4"	8-5/8"	127'		100	
6-3/4"	4-1/2"	2642		130	
	2-3/8"	2485		free	
					
TEST DATA AND REQUEST FOOL WELL	OR ALLOWABLE (Test must be a able for this de	after recovery of total volu epth or be for full 24 hours		must be sent to or	ceed top attom
Date First New Cil Run To Tanks	Date of Test	Producing Method (Flou	, pump, gas lift, e	c.	
	Tubing Pressure	Casing Pressure	C	hoke Size	
Length of Test	Techno Pressure	Caring / rossau			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	G	as - MCF	5 1
GAS WELL					
Actual Frod, Test-MCF/D	Length of Test	Bbls. Condensate/MMC	F G	ravity of Condensate	
1,232	3 hrs.	nil Casing Pressure (Shut	-1-1	nil	
Testing Method (pitot, back pr.) BP	Tubing Freesure (shut-in) 635	640	-111)	3/4"	
CERTIFICATE OF COMPLIANC		OIL	CONSERVATI	ON COMMISSION	1
I breaks captifu that the cutes and r	regulations of the Oil Conservation				
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above in the and complete to the heat of my knowledge and belief.		Original :	Original Signed by FRANK T. CHAVEZ		
above is true and complete to the best of my knowledge and belief.		ll s	IPERVISOR DISTRICT	# 3	
Thomas B Gr	andin A	'''			1104
Thomas B. Grandin	v	If this is a rec	uest for allowabl	pliance with RULE e for a newly drille	d or despensed
(Signa	· · · · · · · · · · · · · · · · · · ·	well, this form must tests taken on the	t be accompanied	l by a tabulation of	the deviation
Agent		11	_		1

(Date)

12-29-80

(Title)

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 concleted we'lls.