

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-105  
Effective 1-1-65

API 30-039-21893

NO. OF COPIES RECEIVED	5
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator Cotton Petroleum Corporation	
Address 717 17th 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 Apache	Well No. 119	Pool Name, including Formation Lindrith Gallup Dakota W	Kind of Lease Jicarilla State, Federal or Fee Indian	Lease No. 126
Location Unit Letter <u>I</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>12</u> Township <u>24N</u> Range <u>4W</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"/> Basin Inc.	Address (Give address to which approved copy of this form is to be sent) 511 West Ohio St., Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit <u>I</u>	Sec. <u>12</u>
	Twp. <u>24N</u>	Rge. <u>4W</u>
	Is gas actually connected? <u>NO</u> 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 April 10, 1979	Date Compl. Ready to Prod. 5-15-79	Total Depth 7559'	P.B.T.D. 7520 KB					
Elevations (DF, RKB, RT, GR, etc.) 6823 KB	Name of Producing Formation Gallup-Dakota	Top Oil/Gas Pay 6324 KB	Tubing Depth 6226					
Perforations	Depth Casing Shoe 7559							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8	393 KB	275 sacks to surface					
7-7/8"	4-1/2	7559 KB	stage 1 600 sacks					
			stage 2 1100 sacks					
			DV tool @ 4145					

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 5-23-79	Date of Test 5-25-79	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 420	Casing Pressure 0	Choke Size 24/64
Actual Prod. During Test	Oil-Bbls. 178	Water-Bbls. 200 Load	Gas-MCF 473

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate, °
Testing Method (pilot, 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]  
(Signature)  
Division Production Manager  
(Title)  
May 31, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 15 1979, 19  
BY Original Signed by A. R. Kendrick  
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.