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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

STATE OF NEW MEXICO  
Energy, Minerals and Natural Resources Department

Form C-104  
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 SCHALK DEVELOPMENT CO.		Well API No.
Address P. O. Box 25825 Albuquerque, NM 87125		
Reason(s) for filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator _____		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Schalk 43	Well No. 2	Pool Name, including formation South Blanco PC EXT	Fed.	Lease No. NM23043
Location Unit Letter <u>A</u> , <u>790</u> Feet From The <u>North</u> Line and <u>790</u> Feet From The <u>East</u> Line Section <u>34</u> Township <u>25N</u> Range <u>3W</u> , <u>NMIM</u> , Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Giant Refining Co. P.O. Box 12999, Scottsdale, AZ 85267			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) El Paso Natural Gas Company P.O. Box 1492, El Paso, TX 79978			
If well produces oil or liquids, give location of tanks.	Unit A	Sec 34	Twp 25N	Rge. 3W
	Is gas actually connected? Yes		When? 5-6-80	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X		X		X		
Date Spudded 10/24/80	Date Compl. Ready to Prod. 6/9/94		Total Depth 6100		P.B.T.D. 3654'			
Elevations (DF, RKB, RF, GR, etc.) 7213' GR	Name of Producing Formation South Blanco PC		Top Oil/Gas Pay 3570		Tubing Depth 3580			
Perforations 3570 to 3575 10 shots; 3586 to 3604 36 shots						Depth Casing Shoe 6100		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
12-1/4"		8-5/8" 24#		327		200 sacks		
7-7/8"		4-1/2" 10.5#		6100		235 & 330/ 280		
		2-3/8" 4.7#		3654				

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
		ORIGINAL SIGNED BY ERNIE BUSCH	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size JUN 14 1994
Actual Prod. During Test	Oil - Dbls.	Water - Dbls.	Gas - MCF OIL CON. DIV. DIST. 3

GAS WELL

Actual Prod. Test - MCF/D 288	Length of Test 3 hrs.	Dbls. Condensate/MCF 0	Gravity of Condensate
Testing Method (pitot, back pr.) Positive choke	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In) 610	Choke Size .375

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



Signature  
Steve Schalk President

Printed Name  
6/10/94

Date  
(505) 881-6649  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 14 1994

By ORIGINAL SIGNED BY ERNIE BUSCH

Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

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.