

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes OCS C-104 and C
Effective 1-1-65

SANTAFE	6
FILE	7
U.S.G.S.	1
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	2
PRORATION OFFICE	

B.R.

Operator
Energy Reserves Group, Inc.
Address
P. O. Box 3280, Casper, Wyoming 82602

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <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 Jicarilla 35	Well No. 13	Pool Name, including Formation N. Lindbergh Pool - Lak Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. Jicarilla
Location Unit Letter N ; 840 Feet From The South Line and 1540 Feet From The West Line of Section 36 Township 25N Range 5W , NMPM, Rio Arriba 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"/> Giant Industries, Inc. Refinery	Address (Give address to which approved copy of this form is to be sent) P. O. Box 256, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1526, Salt Lake City, Utah 84110					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? no.	When W.O. Pipeline

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 <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-5-80	Date Compl. Ready to Prod. 2-29-80	Total Depth 7,350'			P.B.T.D. 7,311'			
Elevations (DF, RKB, RT, CR, etc.) Grd 6807' KB 6821'	Name of Producing Formation Dakota		Top Oil/Gas Pay 7,225'		Tubing Depth 7,255'			
Perforations 7226' - 31'; 7239' - 41'; 7254' - 56'; 7268' - 78' w/1 JSPF					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 448' KB		SACKS CEMENT 300 sx. "B" & 3% CaCl ₂ & 1/4#/sk Flocele			
6-3/4"	4-1/2"		7350' KB		*See back of page			
	2-3/8"		7255'					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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	Date of Test 2-27-80	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 50 psi	Casing Pressure SI 550 psi	Choke Size 1/2"
Actual Prod. During Test 118	Oil-Bbls. 118	Water-Bbls. 2	Gas-MCF ± 300

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.

Judith Rose
(Signature)

DISTRICT CLERK
(Title)

5-16-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 4 1980, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT #3

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 multiple

* 4-1/2" cementing record

1st stage - 525 sx. 50-50 Pozmix +
additives. Stage collar @ 5,354'

2nd stage - 850 sx. 65-35 Pozmix +
additives followed w/100 sx. 50-50
Pozmix + additives.