SANTA FE FILE U.S.C.\$.

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104
Supersedes Old C-104 and C-110
Elloctive 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

111

crate Forms C-104 must be fixed for each pool in multiply wells.

LAND DEFICE					b.t.	
TRANSPORTER OIL		-	·		P:	
GA	·2	1 1				
PROPATION OFFICE						
Operation OFFICE		1				
	iott () i i (Company			
\adress	IOII C	711	Sompany			
D	O 10	0.37	1355 Roswell, New M	exico 88201		
(casan(s) for filing (Chec	Ck proper	box	1355 Roswell, New M	Other (Flease explain)	A: (20 K 300)	
New Well		•	Change in Transporter oi:	,	- AUG 2 5 1981	
Recompletion			Oil Dry Ga		CH. CAN. COM.	
Change in Ownership			Casinghead Gas Conder		Notes in a second	
shange in Ownership			Cashiyinad dat Condo			
change of ownership	give nas	me				
nd address of previous	owner.					
ECONTRATION OF W	~~· .		M	1 Mihat		
ESCRIPTION OF W	ELL A	ND L	Well No. Pool Mand Indiading	ormation Kind of Lease	Lease No.	
Ora			#1 Branco Mes	State, Federal	or Foo Federal	
-ocation			#1 -Blanco wies	va verue	rederar	
	-	E 9.0	N.T.	700	, XX	
Unit Letter E	; _ <u>_</u> 1	520	Feel From The N Lin	se and 790 Feel From T	h*	
	14		9.5.NI _	3W , NMPM, Rio Ar	riha	
Line of Section 2	21	Town	mship 25N Range	J V , NMPM, 1110 131	TTDd County	
	_•			-		
ESIGNATION OF T			ER OF OIL AND NATURAL GA	Address (Give address to which approv	ed copy of this form is to be sent?	
				Farmington, New	·	
			Company			
Name of Authorized Tran				Address (Give address to which approv		
El Paso	o Nat		l Gas Company	P. O. Box 1492 El		
If well produces oil or lic	quids,	i	Unit Sec. Twp. Rgs.	Is gas actually connected? Whe	· ·	
rive location of tanks.		 	<u>' E </u>	NO as	s soon as possible	
this production is cor	mmingle	d with	h that from any other lease or pool,	give commingling order number:		
COMPLETION DATA						
Designate Tune	f C	100:00	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
Designate Type o	1 Comp	ietio	n – (A)	X	1	
Date Spudded			Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
1/26/81			6/10/81	8289	8242	
levations (DF, RKB, R7	Γ, GR, e	ıc.j	Name of Producing Formation	Top Oil/Gas PayGallup 7183	Tubing Depth.	
7394 KB	}		Mesa Verde Dakota	KMV 6008 Dakota 8064	8071	
Perforations					Depth Casing Shoe	
KMV 6008 -	6142	2	Gallup 7183 - 7416	Dakota 8064 - 8235	8286	
			TUBING, CASING, AN	D CEMENTING RECORD		
HOLE SIZ	E		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12 1/4			9 5/8	272	140 sks	
$\frac{121}{83/4}$	·····		7	6238	600 sks	
$\frac{61/4}{}$	Lino	r	4 1/2	8286	350 sks	
01/4	Line	<u> </u>	1 1/2			
				after recovery of total volume of load oil	and must be equal to or exceed top oils	
TEST DATA AND RI	EQUES	TFC		after recovery of total volume of load bill epth or be for full 24 hows)	and must be squared or exceed top ditods	
NI, WELL Date First New Oli Run	To Tank		Date of Test	Producing Method (Flow, pump, gas lif	i, eic.)	
		_	•	Flow		
6/5/81	1		6/19/81	Casing Pressure	! Cnoke Sixe	
_ •			275#	900#	16/64	
24 hrs			Cil-Bbis.	Water-Bbis.	Gas - MCF	
Actual Proc. During Tes	•			40 (Frac)	500	
			20	40 (1140)	1 000	
DAS WELL				- BNI- C	I Complete of Condensate	
Actual Prod. Tost-MCF.	70		Length of Test	Bbls. Concensate/MMCF	Gravity of Condensate	
			1	100000000000000000000000000000000000000	I Chair Stra	
Testing Method (picot, b	ack pr.)		Tubing Pressure (Shut-in)	Cosing Pressure (shut-in) 7 day SI 1571#	Choke Sixe	
			7 day SI 576#	7 day SI 1571#		
ERTIFICATE OF (COMPI	JANG	CE	OIL CONSERVA	TION COMMISSION	
					SEP 24 1981	
handy contify that th	e ruies	and r	regulations of the Gil Conservation	APPROVED		
ommission have been	lamos n	led w	vith and that the information given	1! Original Signed by FRANI	(T. CHAVE Z	
bove is true and con	nplete t	o the	best of my knowledge and belief.	BY		
** - w	<i>ب</i> ر	- ¬		TITLE SUPERVISOR DISTRICT # 3		
1//	43	11	777 1SA		•	
1/1/	<i>\</i>	(This form is to be filed in	compliance with AULE 1104.	
///		م م	et	If this is a request for allow	If this is a request for allowable for a newly drilled or despend	
Frank O. Ellic	ott	(Signa	stur#)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
Operator				All anctions of this form my	st be filled out completely for allow	
		(T 11	tie)	able on new and recompleted w	clia.	
August 24, 198	31			Fill out only Sections I. I	III, and VI for changes of owner	
		120	2: 1	well name or number, or transpor	ter, or other such change of condition	

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