

## OIL CONSERVATION DIVISION

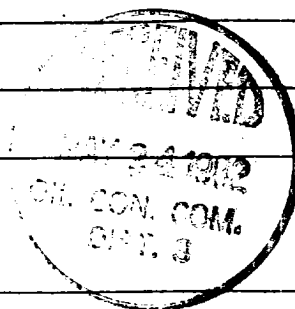
P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS3.E.  
30XON

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

Operator Northwest Exploration Company	
Address P. O. Box 5800 T. A., Denver, Colorado 80217	
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 Gavilan	Well No. 1	Pool Name, Including Formation Wildcat - Gallup	Kind of Lease State, Federal or Fee	Federal	Lease No. NM-43758
Location Unit Letter <u>A</u> ; <u>930</u> Feet From The <u>North</u> Line and <u>910</u> Feet From The <u>East</u> Line of Section <u>26</u> Township <u>25 North</u> Range <u>2 West</u> , 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1528, Denver, Colorado 80201	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Northwest Pipeline Corporation EPL	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1526, Salt Lake City, Utah 84111	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? When Waiting on pipeline connection.	

If this production is commingled with that from any other lease or pool, give commingling order number:

## V. 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 <input checked="" type="checkbox"/>	Same Res'v.	Diff. Res'v.
Date Spudded 12-26-81	Date Compl. Ready to Prod. 3-21-82		Total Depth 8241'		P.B.T.D. 8073'			
Elevations (DF, RKB, RT, GR, etc.) 7467' KB	Name of Producing Formation Gallup		Top Oil/Gas Pay 6821'		Tubing Depth 8010'			
Perforations 6821' - 7562' - 24 holes .4" Limited Entry					Depth Casing Shoe 8240'			

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-1/2"	9-5/8"	540'	400 sks
6-1/4"	4-1/2"	8240'	1100 sks
"	2-3/8"	8010'	
"	Retrievable Packer	7600'	

## VI. 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 3-21-82	Date of Test 3-21-82*	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 200 psi	Casing Pressure 530 psi	Choke Size 32/64
Actual Prod. During Test	Oil - Bbls. 62 22	Water - Bbls. 3	Gas - MCF 545 404

\*NOTE: Both Gallup and Dakota zones were produced during test.

## 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

## VII. 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.

L. O. Van Ryan (Signature)  
Vice President - Operations (Title)  
May 19, 1982 (Date)

## OIL CONSERVATION DIVISION

6-1-82 JUN 1 1982  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by FRANK T. CHAVEZ  
SUPERVISOR DISTRICT #3  
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 multiple