From

Luanne Hisel

March 6, 1984

 \mathscr{T}_{o}

Danna Lindsay Petro-Lewis Corp.

Re: Florance #8a, #9A and #9, C-ll5 filing (Ojito Gallup Dakota)

Per our records the Ojito Gallup Dakota is temporarily abandoned behind a retrievable bridge plug and we have received from El Paso Natural Gas a notice of disconnect for this zone on each of the above wells.

Since the time of temporary abandonment the #11 well was changed to the 8A and the #10 changed to the 9A to comply with numbering of infill wells. The status of these wells since the temporary abandonment should have shown "T" and since the time of disconnect should show "D", on your C-115 filing.

Submit a correction for page 18 of the C-115, for each month needed, to correct the well number and status.

If you have any questions, please call.

Sincerely,

E-5-25/V-3W

Suame

Oil Conservation

Aztec, New Mexico

VERIGY AND MITHTALS DEPARTMENT						rn C-104 visad 10-1-78
OIL CONSERVATION DIVISION P. O. DOX 2000						
BANTATE		SANTA FE, NE	/	37501		
V h.O.A.						
LAND DITKE	REQUEST FOR ALLOWABLE					
TRANSPORTER OIL AND					•	
PROMATION OFFICE	AUTHORI:	ZATION TO TRAN	SPORT OIL AND	O NATURAL GAS	•	•
Olatorol Carlotte		•				
Petro-Lewis Corporation	on				A -	
Address	70.400				OIL CON.	+ _
Box 16200 Lubbock, Te					11 766	/ By
No- Well		Transporter of:	Othe	(Please explain)	Man	. a le le
Recompletion	Oil				O: "AR 05	100. PM
Change In Ownership	Casingheod	\equiv	OIL COM	984 Q		
<i>Y</i>			DIST.	DIV		
If change of ownership give name and address of previous owner			·		. 3	, y,
Lease Name		Pool Name, Including	Formation	Kind of Le	-01e	SFL.****
Florance	8A	Ojito-Gallup	Dakota	XXXXX, F.		SF~ 080565
Location				<u></u>		/
Unit Letter E :	2036 Feet From	The North Li	n• and 100	OO Feel Fro	om The West	
-			-			
Line of Section 5 To	ownship 25N	Range	3W	.NMPU, Ri	o Arriba	Coun
DESIGNATION OF TRANSPOR	TER OF OU (IND MATURAL C	4.5			
. DESIGNATION OF TRANSPOR		AND NATURAL G.		address to which ap	proved copy of this fo	orm is to be sent!
Permian Corporation			P.O. Box 1183 Houston, Texas 77001			
Name of Authorized Transporter of Casinghead Gas or Dry Gas [X]			Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company Unit Sec. Twp. Rge.			P.O. Box 1492 El Paso, Texas 79978			
If well produces oil or liquids,	Is gas actually connected? When					
give location of tanks,			1//0			
If this production is commingled w	ith that from any	other lease or pool,	give commingli	ng order number:		
COMPLETION DATA	Oil	Well Gas Well	New Well Wo	orkover Deepen	Plug Beer 'So.	me Hesty. Dill. Re
Designate Type of Completi	on - (X)	<u> </u>		1		•
Date Spudded	Date Compl. Red	ady to Proc.	Total Depth		P.B.T.D.	
(25.000.000.000						
Elevations (DF, RKB, RT, GR, etc.)	"lame of Product	ing Fermation	Top OII/Gas Pa	13	Tubing Desth	
Perforations			1		Depth Casing St	200
	TU	BING, CASING, AN	D CEMENTING	RECORD		
HOLE SIZE			DEPTH SET		SACKS CEMENT	
			 			···
	1					
TEST DATA AND REQUEST F	OR ALLOWAR	IF Classimust has		ral volume of load o		
OIL WELL	ON ALLOWARD		epth or be for full:		it cum whit the edmon	to or excess top at
Date First New Cil Run To Tonks	Dote of Test		Producing Metho	od (Flow, pump, gas	life, etc.)	
						, <u></u>
Length of Test	Tubing Pressure	,	Cosing Pisseure	•	Choke Size	
Actual Pred. During Test	Oll-Bbis.		Water-Bbls.		Cos-MCF	
Xerodi Pica. 2111119 1911	0		mulei - Bbit.		002 4.0.	
GÁS WELL						
Actual Frod. Test-MCF/D	Length of Test		Bbla. Condensor	I. AMCF	Gravity of Cond	ans ale
Testing Method (pilot, back pr.)	Tubing Piesewe	(stat-in)	Cosing Pressus	(shut-in)	Choke Size	-
			1			
CERTIFICATE OF COMPLIAN	CE		1	DIL CONSERVA		J
Thereby payify that the auton and	remiletions = f AL	• 011 C	APPROVED	MAR 85	1984	, 19
I hereby certify that the rules and Division have been complied with	Sra	1 Jan	/			
above is true and complete to the			BY	······································		
\mathcal{L}			TITLE SUPERVISOR DISTRICT # 3 This form is to be filed in compliance with nucl 1104.			

(Siekaiwe)

Accounting/Revenue Production Supervisor (700)

2/28/84 (Date)

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat taken on the well in accordance with AULE 111.

All sections of this form must be filled out completely for allerable on new and recompleted wells.

Fill out only Sections I, II, and VI for changes of own well name or number, or transporter, or other such change of conditions to the such change of conditions to