# DISTRIBUTION SANTA ITE FILE U.S.G.S. LAND OFFICE

(Date)

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

	TRANSPORTER OIL	AND					
	OPERATOR GAS						
1.	PRORATION OFFICE					·	
	Operator O.11 Company						
	Getty Oil Company						
	P.O. Box 3360, Casper, WY 82602-3360						
	Reason(s) for filing (Check proper box)  Other (Please explain)						
	New Well X	New Well X Change in Transporter of:					
	Recompletion	C11 Dry G	7				
	Change in Ownership Castrighead Gas Condensate						
	If change of ownership give name and address of previous owner						
Ц.	DESCRIPTION OF WELL AND	LEASE		Two-days			
	Lease Name Well No. Pool Name, Including F				Contract		
	Jicarilla "C"	6E Basin Dako	ota	State, Federa	indian indian	<u> # 34</u>	
	1 00	OO man my Couth to	970	Feet From 1	rhe West		
	Unit Letter M : 99	PO Feet From The South Lir		r eet r rom /	ne west		
	Line of Section 27 Tow	waship 25N Range	5W , NMPN	. Rio Arr	iba	County	
111	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS -		<i>:</i>		
	Name of Authorized Transporter of Oil or Condensate A Address (Give address to which approved copy of this form is to be sent)						
	Plateau Incorporated		P.O. Box 2625	rque. New Mexi	co 87125		
	Name of Authorized Transporter of Casinghead Gas or Dry Gas 🔀		P.O. Box 26251 Albuquerque, New Mexico 87125 Address (Give address to which approved copy of this form is to be sent)				
	El Paso Natural Gas		P.O. Box 990.	Farmingt	on, New Mexico	87401	
	If well produces oil or liquids,	Unit   Sec.   Twp.   Rge.   M   27   25N   5W	No	ear twee	- -	•	
	qive location of tanks.  M						
IV.	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	New Well Workover	Deepen	Plug Back   Same Re	s'v. Diff. Res	
	Designate Type of Completio		X	1	1 1	1	
	Date Studded	Date Compl. Ready to Prod.	Total Depth	-, -	P.B.T.D.		
	4-16-82	8-11-82	7260'		72 <u>18</u> '		
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
	6676' GR	Dakota	7062		7091'		
	Perforations				Depth Casing Shoe		
	TUBING, CASING, AND CEMENTING RECORD						
		<del></del>	DEPTHS		SACKS CE	MENT.	
	HOLE SIZE	CASING & TUBING SIZE	316'		(Over)		
	12 1/4"	8 5/8" 4 1/2"	7260'		(Over)		
	1.1/8	2 3/8"	7091'		, , , , , , , , , , , , , , , , , , ,		
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	ifter recovery of socal valu	ime of load oil	and must be equal to or	exceed top allo	
	OIL WELL able for this de		pth or be for full 24 hours) Producing Method (Fiow. pump, gas lift, etc.)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Fibb. pump, gas		,,,,		
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size		
	Length of 1 est						
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.		Gae-MCF		
	-						
	GAS WELL				Ta		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MKC	F	Gravity of Condensate	•	
	1137 MCFPD Testing Method (pitot, back pr.)	3 Hours Tubing Presewe (Shut-in)	7.04	-in)	Choke Size		
	BP	2378#	2378#	,	48/64"		
,,		<del></del>	<del></del>	ONSEDVAT			
41,	CERTIFICATE OF COMPLIANCE		9-12-80	SFP 7'3'	1982		
	I hereby certify that the rules and regulations of the Oil Conservation		OIL TONSERVATION DIVISION  9-/3-80- SEP 1 3 1982  APPROVED				
	nivision have been complied with	hereby that the true and complied with and that the information given bove is true and complete to the best of my knowledge and belief.		By Original Signed by FRANK T. CHAVEZ			
	shove is true and complete to the	<u> </u>					
			TITLE SUPERVISOR DISTRICT # 3				
			This form is tr	n be filed in a	compliance with MUL	E 1104.	
	( ll the		TE ship is a per	nest for allow	able for a newly drill	led or despens	
	(Signature)		well, this form must be accompanied by a tabulation of the deviatic tests taken on the well in accordance with RULE 111.				
	Area Superintendent		All sections of this form must be filled out completely for allow				
	(Title)		able on new and mecompleted wells.				
	9-1-82		Fill out only Sections I. II, III, and VI for changes of owner				
	(Date)		well name or number, or transporter, or other such change of condition				

Separate Forms C-104 must be filed for each pool in multiple completed wells.

### Cementing Record

- 8 5/8" Casing Cemented with 325 cubic feet of Class "B" cement with 1/4# cellophane flakes and 2% CaCl<sub>2</sub> circulated 15 BBL of good cement at surface.
- 4 1/2" Casing FIRST STAGE

Cemented with 660 cubic feet of 50--50 Pozmix cement with 4% gel, 8# perlite, and 1/4# flocele. Tailed with 170 cubic feet of Class "H" self stress cement. Opened DV tool at 5159'. Circulated out 30 cubic feet of cement.

### SECOND STAGE

Cemented with 720 cubic feet of 50-50 Pozmix cement with 4% gel, 8# perlite, and 1/4# flocele. Tailed with 89 cubic feet of Class "B" neat cement. Open DV tool at 3811'. Circulated out 90 cubic feet of cement.

# THIRD STAGE

Cemented with 900 cubic feet of 50-50 Pozmix with 4% gel, 8# perlite and 1/4# flocele. Tailed with 708 cubic feet of Class "B" 0.6% Haladge and 1/4# flocele. Circulated 70 cubic feet of good cement.