

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS3046/W  
RECEIVED  
MAR 05 1988  
OIL CON. DIV.  
DIST. 3

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

I. Operator Nassau Resources, Inc.	
Address P O Box 809, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
<b>CONFIDENTIAL</b>	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

## II. DESCRIPTION OF WELL AND LEASE

Lease Name Wishing Well 35	Well No. 7	Pool Name, including Formation West Puerto Chiquito Mancos	Kind of Lease State, Federal or Fee	Lease No. Fee
Location				
Unit Letter <u>G</u> : <u>2210</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>East</u>				
Line of Section <u>35</u> Township <u>24N</u> Range <u>1W</u> , NMPM, Rio Arriba County				

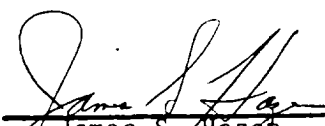
## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining, Inc.	Address (Give address to which approved copy of this form is to be sent) P O Box 256, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P O Box 4990 Farmington, NM 87499	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 35
	Twp. 24N	Rge. 1W
	Is gas actually connected? <input type="checkbox"/> When	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

## VI. 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 is true and complete to the best of  
my knowledge and belief.
  
 James S. Hazen (Signature)  
 Field Supt.

(Title)

3/8/88

(Date)

## OIL CONSERVATION DIVISION

MAR 05 1988

APPROVED \_\_\_\_\_

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 allow-  
able 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 multiply  
completed wells.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX		XX					
Date Spudded 12-20-88	Date Compl. Ready to Prod. 3-5-88		Total Depth 7850'			P.B.T.D. 7780'			
Elevations (DF, RKB, RT, GR, etc.) 7255' GL	Name of Producing Formation Mancos		Top Oil/Gas Pay 6344'			Tubing Depth 6613' KB			
Perforations 6344-6597						Depth Casing Shoe 7819'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4"	9-5/8"		304'		212 cu.ft.				
7-7/8"	5-1/2"		7819'		2821 cu.ft.				
					in 3 stages.				
			6613' KB						

#### 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 2-22-88	Date of Test 3-5-88	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 300 psi	Casing Pressure 810 psi	Choke Size 27/64"
Actual Prod. During Test	Oil-Bbls. 402 BOPD	Water-Bbls. 20 (frac wtr only)	Gas-MCF 359 MCFD

#### 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