

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	NAT
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
T. H. McELVAIN OIL & GAS PROPERTIES

Address
Post Office Box 2148, Santa Fe, New Mexico 87504-2148

Reason(s) for filing (Check proper box):
☒ New Well
☐ Recompletion
☐ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain):

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lim	Well No. #1	Pool Name, including Formation Lybrook Gallup Ext	Kind of Lease State, Federal or Fee State (NM)	Lease No. E-6833
Location Unit Letter M ; 1250 Feet From The South Line and 850 Feet From The West Line of Section 36 Township 24 North Range 7 West, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

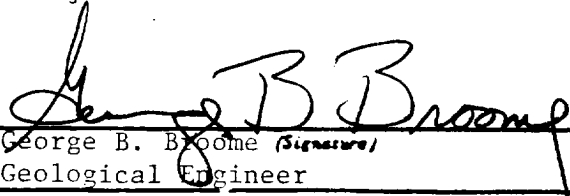
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary Energy Corporation	Address (Give address to which approved copy of this form is to be sent) 115 Inverness Drive East, Englewood, CO 80112
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> T. H. McElvain Oil & Gas Properties	Address (Give address to which approved copy of this form is to be sent) Post Office Box 2148, Santa Fe, NM 87504-2148
If well produces oil or liquids, give location of tanks. Unit M Sec. 36 Twp. 24 N Rge. 7W	Is gas actually connected? When Yes 9-29-88

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.


George B. Broome (Signature)
Geological Engineer
(Title)
October 5, 1988
(Date)

OIL CONSERVATION DIVISION

APPROVED **OCT 7 1988**, 19
BY
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 allowance 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.
	X		X					
Date Spudded 7/14/88	Date Compl. Ready to Prod. 7/21/88 9-28-88		Total Depth 5700		P.B.T.D. 5652			
Elevations (DF, RKB, RT, GR, etc.) 6893 GR	Name of Producing Formation Gallup		Top Oil/Gas Pay 5038		Tubing Depth 5545			
Perforations Upper Gallup 5038-5398, Lower Gallup 5516-5589					Depth Casing Shoe 5693			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8" 24#		268		200 sks (236 ft. ³)			
7-7/8"	4-1/2" 10.5#		5693		625 sks (1054 ft. ³)			

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 9/29/88	Date of Test 9/29/88	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 12 hrs	Tubing Pressure 20 psi	Casing Pressure 450 psi	Choke Size 1/2"
Actual Prod. During Test	Oil - Bbls. 28	Water - Bbls. 15*	Gas - MCF 50

GAS WELL

* frac water

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