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P.O. Box 1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <u>Giant Exploration & Production Company OK</u>		Well API No. 30-039-24614
Address P.O. Box 2810, Farmington, N.M. 87499		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> 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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
Change of operator give name and address of previous operator		

I. DESCRIPTION OF WELL AND LEASE

Lease Name Tesia Kuchera	Well No. 2	Pool Name, Including Formation West Lindrith/Gallup <u>Deep Test</u>	Kind of Lease State, Federal or Fee Federal	Lease No. NM 23043
Location Unit Letter <u>G</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>East</u> Line Section <u>35</u> Township <u>25N</u> Range <u>3W</u> , NMPM, Rio Arriba County				

II. 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	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, N.M. 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Does well produce oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>35</u>	Twp. <u>25N</u>	Rge. <u>3W</u>	Is gas actually connected? No	When ?
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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 2-3-90	Date Compl. Ready to Prod. 4-10-90		Total Depth 8120'		P.B.T.D. 8055.13'			
Elevations (DF, RKB, RT, GR, etc.) 7130' GLE	Name of Producing Formation Gallup		Top Oil/Gas Pay 6824'		Tubing Depth 7803'			
Perforations 6824'-6941', 6998'-7094', 7932'-7951'					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8"		357' KB		205 sks.			
8-3/4"	5-1/2"		8103.44'		1085 sks.			
	2-7/8"		7803'					

III. 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 Tank 4-10-90	Date of Test 7-2-90	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 110	Casing Pressure 110	Choke Size 3/8"
Actual Prod. During Test	Oil - Bbls. 20	Water - Bbls. 6	Gas - MCF 104

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

VI. OPERATOR 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.

Aldrich L. Kuchera
Signature
Aldrich L. Kuchera President
Printed Name
JUL 25 1990
Date
(505) 326-3325
Telephone No.

OIL CONSERVATION DIVISION

AUG 6 1990

Date Approved

By Burt J. Chang

SUPERVISOR DISTRICT #3

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.