

DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS
OPERATOR	1
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

B.K.

Operator Apache Oil Corporation	
Address 2016 Lincoln Center, 1660 Lincoln Street, Denver, Colo. 80264	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	1000 bbl. testing allowable
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Apache Federal B	Well No. 1	Pool Name, Including Formation Dufur Point Sal. Wak. Extension Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. NM 28751
Location Unit Letter J ; 1650 Feet From The South Line and 1650 Feet From The East Line of Section 3 Township 24N Range 8W , NMPM, San Juan 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"/> Merit Oil Corporation	Address (Give address to which approved copy of this form is to be sent) Suite 300, 300 W. Arrington, Farmington, N.M. 87401					
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)					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 3	Twp. 24N	Rge. 8W	Is gas actually connected? No	When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 11/22/76	Date Compl. Ready to Prod. 2/11/77	Total Depth 7216'			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 7203' GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 7126'			Tubing Depth			
Perforations 7126-36', 7154-64'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			SACKS CEMENT			
	5 1/2"	7216'			400			
	8-5/8"	262'			250			

V. 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 Tanks 2/11/77	Date of Test 2/10/77	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure N/A	Casing Pressure 50 lb.	Choke Size N/A
Actual Prod. During Test	Oil-Bbls. 70	Water-Bbls. None	Gas-MCF TSTM

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OIL CON. COM.
DIST. 3

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

APACHE OIL CORPORATION

By [Signature]
(Signature)

Agent
(Title)

2/11/77
(Date)

OIL CONSERVATION COMMISSION

FEB 11 1977

APPROVED _____, 19____

BY [Signature]

TITLE PETROLEUM ENGINEER DIST. NO. 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 allowable 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.