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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Caulkins Oil Company

Address
P.O. Box 780 Farmington, New Mexico

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	
		Dry Gas	<input type="checkbox"/>	
		Condensate	<input checked="" type="checkbox"/>	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Breech "A"	Well No. 136 E	Pool Name, including Formation Blanco Mesa Verde-Otero Chacra	Kind of Lease State, Federal or Fee Federal	Lease No. SF079035A
Location Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line of Section 10 Township 26 North Range 6 West , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Giant Refinery Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256 Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) 1508 Pacific Ave. Dallas, Texas
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When 0 10 26 N 6 W Yes 12-10-80

If this production is commingled with that from any other lease or pool, give commingling order number: R-5647

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						
Date Spudded 69-52	Date Compl. Ready to Prod. 9-23-80	Total Depth 7446'	P.B.T.D. 7446'					
Elevations (DF, RKB, RT, GR, etc.) 6491 GR	Name of Producing Formation Chacra - Mesa Verde	Top Oil/Gas Pay 3906'	Tubing Depth 5470'					
Perforations 3906' - 3912' (Chacra) 5055' - 5328' (Mesa Verde)			Depth Casing Shoe 7446'					

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10 3/4"	409'	175
9 3/4"	7 5/8"	6635'	1075
6 3/4"	4 1/2"	7446'	225
	1 1/4"	5470'	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of land 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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GAS WELL

Actual Prod. Test-MCF/D 977	Length of Test 3 Hours	Bbls. Condensate/MCF	Gravity <input checked="" type="checkbox"/> Bbls. Gas
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-In) 973	Casing Pressure (Shut-In) 973	Choke Size 3/4"

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.

Charles Segura
(Signature)
Superintendent
(Title)
8-8-83
(Date)

OIL CON. DIV.

OIL CONSERVATION DIVISION

APPROVED AUG 19 1983, 19

BY Frank J. Sanyal

TITLE SENIOR DISTRICT ENG

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.

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