OCHEA WO TARRIOTE DECRETATIVE taxamorios

## OIL CONSERVATION DIVISION P. O. HOX 2088

	SANTA FE, NEW MEXICO 87501								
V 1.0									
	REQUEST FOR ALLOWABLE								
	TRANSPORTER CAR		AND						
	OPERATOR	AUTHORIZATION TO TRANSP	PORT OIL AND NATURAL	GAS					
ŧ.	PAGNATION OFFICE								
	Caulkins Oil Company								
	P.O. Box 780 Farmington, New Mexico								
	Proson(s) for liting (Check proper box								
	New Well	Change in Transporter of:							
	Recompletion	OII Dry Ga		1					
	Change In Ownershit	Casinghead Gas Conder	nigrate 🔃	hen kil					
	If change of ownership give name and address of previous owner		<del> </del>	·					
11.	DESCRIPTION OF WELL AND	Vell No. Pool Name, Including Fo	ormation   Kind	of Lease Lo.					
	Breech A	175E Blanco Mesa Ver		1 -					
•	Location			1000000					
	В 60	60 Feet From The North Lin	1980	East					
	Unit Letter::	Feet From the Lin		At I form I had					
	Line of Section 8 Tow	waship 26 North Range	6 West ', NMPM,	Rio Arriba County					
Π.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S						
	Name of Authorized Transporter of Ott	or Condensate	Address (Give address to which approved copy of this form is to be sent)						
	Inland Corporation		P.O. Box 1528 Farmington, New Mexico						
	Hame of Authorized Transporter of Cas		Address (Give address to which approved copy of this form is to be sent)						
	Gas Company of New	W MEXICO	1508 Pacific Ave	Dallas, Texas					
	If well produces oil or liquids, give location of tanks.	B 8 26N 6W	Yes	11-23-80					
	<u> </u>	<u> </u>	<del></del>						
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	give commingling order num	Der: R JOH					
١.		Oil Well Gas Well	New Well Workover De	epen   Plug Back   Same Res'v.   Diff. Res'v					
	Designate Type of Completion	$on - (\lambda)$		1 1					
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
	3-17-53	10-13-80	7400	7400					
	Elevations (DF, RKB, RT, GR, etc.) 6482 GR	Name of Producing Formation Chacra-Mesa Verde	Top Oil/Gas Pay 3776	Tubing Depth 5340					
		Chacta-Mesa Verde	3770	Depth Casing Shoe					
	Perforations 3776 - 3848 (Chacra) 4567 - 5286 (Mesa Verde) 7400								
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	15"	10 3/4"	499.5	200					
••	8 3/4"	7"	6620	950 بنسيس					
•	6 1/4"	4 1/2"	6490 - 74	00 275					
		1 1/4"	5340						
÷.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be af	feer recovery of socal volume of	load oil and finus be equal to or exceed top allow					
	QIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pum						
	Date First New Oil Run To Tanks	Date of Test	blognering Method (Liom! baw						
		Tubing Pressure	Casing Pressure	Choke Site					
	Length of Teet	I do the Piers							
	Actual Prod. During Test.	Oil · Bble.	Water - Bble.	Gan MCF					
	Actual Field, Duling 1991.		<u> </u>	Was connected and the					
		1	L						
	GAS WELL								
•	Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate					
	1543	3 Hours							
-	Teeting Method (putot, back pr.)	Tubing Pressure (shut-is)	Cosing Pressure (Shut-in)	Choke Size 3/4"					
<b>-</b> . :	Backpressure	1471	1471						
Ί.	CERTIFICATE OF COMPLIANO	CE		ERVATION DIVISION					
		·	FEB 27 1981						
	I hereby certify that the rules and r	egulations of the Oil Conservation							
	Division have been complied with above is true and complete to the	and that the information given beat of my knowledge and belief.	DEPUTY OIL & GAS INSPECTOR, DIST. #3						
	and the first and complete to the		Original Signed by CHARLES GHOLSON						
	(		TITLE						
			This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 113.  All sections of this form must be filled out completely for allowable on new and recompleted wells.						
	X Harles	Lisand							
•••	(Siena	1100)							
	Superio	ntendent							
-	(7 ti	le)							

2-20-81 (1)014)

Fill out only Sections I. II. III, and VI for changes of awast, well name or number, or transporter, or other such change of condition.

Reparete Forms C-104 must be filed for each pool in multiply

## OIL CONSERVATION DIVISION

[	OIL CONSERVATION DIVIS					Mevista 10-1-70		
paramarion .			OX 2088					
FILE	57	AMEA PE, MI	W MEXICO 87	501				
w 6.0.0.								
LAND OFFICE		REQUEST F	OR ALLOWABLE					
TRANSPURIER			AND					
GPFMATOM PAUNATION UPFICE	AUTHORIZA	CTION TO TRAN	SPORT OIL AND N	IATURAL GAS	<b>.</b>			
Operator			<del></del>	···	·	***************************************		
Caulkins Oil Com	pany	·····		<del></del>				
P.O. Box 780		armington.		,				
Reason(s) for liling (Check proper bo	Change in Tre	nnaporter of	Other (1	l'iease explain)	•			
Recompletion	Oil	Dry (	<b>∞</b> •/ ☐	7.		7		
Change In Ownershit	Casinghead G	) <del>                                     </del>	erisate X			1		
If change of ownership give name and address of previous owner					,			
·	15465							
. DESCRIPTION OF WELL AND	Well No. Por	ol Name, Including	Formution	Kind of L	.0080	Lease No.		
Breech A	175E	Basin Dak	ota	State, Fe	deral or Fee Fe	ederal SF079035		
Location								
Unit Letter B : 6	560 Feet From T	North L	ine and 1980	Feet Fi	rom The	East		
Line of Section 8 To	ownship 26 No:	rth Range	6 West	NMPM,	Rio Arriba	County		
	TER OF OIL AN	D NATURAL C	AC					
DESIGNATION OF TRANSPOR	II OF OIL AN	nagle X	Addiess (Give add	ress to which a	pproved copy of this	form is to be sent)		
Inland Corporation	Inland Corporation			P.O. Box 1528 Farmington, New Mexico				
i .	Name of Authorized Transporter of Casinghead Gas or Dry Gas 🛣					form is so be sent)		
Gas Company of No		1 <del></del>	1508 Paci		Dallas,	Texas		
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge. 61		nnectedy	•	20-80		
If this production is commingled w	of the that from any of	ther lease or pool	give commingling	order number:	·	<del></del>		
COMPLETION DATA								
Designate Type of Completi	ion - (X)	1	New Well Work	over Deepen	Plug Back	Same Res'v. Dill. Res'v		
	Date Compl. Read	Y to Prod.	Total Depth		P.B.T.D.			
Date Spudded	10-13		·	7400	7.5.7.5.	7/.00		
Elevations (DF, RKB, KT, GR, etc.)			Top Oll/Gas Pay	7400 Top Oil/Gas Pay		7400 Tubing Depth		
6482 GR	Dakot	a		7130		7322		
Perforations			*		Depth Casing			
7130 - 7356			in acurusus pe			7400		
100 5 5175		TUBING SIZE	ID CEMENTING RE	TH SET	SAC	CKS CEMENT		
HOLE SIZE		0 3/4".	- DEF	499.5	300	200		
8 3/4"		7"		6620	A PROPERTY.	950		
6 1/4"	<del></del>	4 1/2"	<del></del>	90-7400	13 6	275		
		2 3/8"		7322	1			
TEST DATA AND REQUEST F	FOR ALLOWABLE	E (Test must be	after recovery of total	l volume of load	oll and market and	ual to or exceed top allow		
OIL WELL Date First New Oil Run To Tanks	Date of Teet	able for this i	Producing Method					
Date Pilet New Oil Nam 10 June						1.		
Length of Test	Tubing Pressure		Casing Pressure		hote Size	2		
Actual Prod. During Test	Oil-Bbie.	·	Water - Bble.		Gas-MCF			
GAS WELL								
Actual Frod. Test-MCF/D	Length of Test		Bbls. Condensate/	MMCF	Gravity of Co	ondenaate		
2903	3 Hou		Casing Pressure (	(h=+=(n)	Choke \$100			
Backpressure	1603	Bude-ya )	PKR	=	C	3/4"		
CERTIFICATE OF COMPLIAN	CE		OI	L CONSERV	71981 PIVISI	ON		
		00 0		LED 4	, , , , , , , , , , , , , , , , , , , ,			
I hereby certify that the rules and Division have been compiled with	h and that the info	rimation given	DEPUTY OIL 8	GAS INSPECT	OR, DIST. #3	•		
above to true and complete to th	DY	DEPUTY OIL & GAS INSPECTOR, DIST. #3  BY  Original Signed by CHARLES GHOLSON  TITLE ORIGINAL SIGNED BY CHARLES GHOLSON						
	<b>\</b>	•	TITLE Origina	1 Aldura by Cu	,			
////	/		I i			th MULE 1104.		
Solid Vist	10 15 10 10 0	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despended						
1511	nayer)		I wall this form	must be accou	mpanted by a tabu .cordance with A	ulation of the deviction		
Superi	ntendent		No ness; spen;	in of this form	must be filled ou	it completely for allow		

(Title) 2-20-81 All sections of this form must be filled out completely for allowable on new and recompleted walls.

Fill out only Sections 1, II, III, and VI for changes of owner, wall name or number, or transporter, or other such Change of condition.

Senarate Forms C-104 must be filed for each pool in multiply