

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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 ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☒
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name Breech "E" Well No. 68 E Pool Name, including Formation Chacra - Blanco Mesa Verde Kind of Lease State, Federal or Fee Federal Lease No. NM 03551
Location
Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West
Line of Section 4 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 ☐ or Condensate ☒ 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 ☐ or Dry Gas ☒ 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 L Sec. 4 Twp. 26 N Rge. 6 W Is gas actually connected? Yes When 11-28-80
If this production is commingled with that from any other lease or pool, give commingling order number: R-6266

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'
Date Spudded 5-6-53 Date Compl. Ready to Prod. 8-25-80 Total Depth 7392' P.B.T.D. 7392'
Elevations (DF, RKB, RT, GR, etc.) 6482 DF Name of Producing Formation Chacra - Mesa Verde Top Oil/Gas Pay 3816' Tubing Depth 5318'
Perforations 3816' to 3948' (Chacra) 5030' to 5310' (Mesa Verde) Depth Casing Shoe 7270'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
15" 10 3/4" 445' 175
8 3/4" 7" 6641' 950
6 1/8" 4 1/2" 6470' - 7392' 225
1 1/4" 5318'

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 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

GAS WELL
Actual Prod. Test-MCF/D 1062 Length of Test 3 Hours Bbls. Condensate/MMCF Gravity of Gas 0.87
Testing Method (pilot, back pr.) Back Pressure Tubing Pressure (shut-in) 1049 Casing Pressure (shut-in) 1067 Choke Size 3/4"

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 above is true and complete to the best of my knowledge and belief.
Charles E. Viquez
(Signature)
Superintendent
(Title)
8-8-83
(Date)

OIL CONSERVATION DIVISION
APPROVED AUG 11 1983
BY Frank J. Quigley
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 deviate 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 multiphase completed wells.