

I.

Operator

CONSOLIDATED OIL & GAS, INC.

Address

1860 Lincoln Street, Lincoln Tower Bldg., Denver, Colorado 80203

Reason(s) for filing (Check proper box)

New Well

Change in Transporter of:

## Recompletion

Oil

Dry Gas

### Change in Ownership

### Casinghead Gas

Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Northwest</u>		Well No. <u>1</u>	Pool Name, Including Formation <u>BS MESA Gallup</u>	Kind of Lease State, <u>Federal</u> or Fee
Location Unit Letter <u>G</u> ; <u>1850</u> Feet From The <u>N</u> Line and <u>1850</u> Feet From The <u>E</u>				
Line of Section <u>7</u> , Township <u>26</u> Range <u>4</u> , NMPM, <u>Rio Arriba</u> County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
					Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
					Northwest Pipeline Corporation		501 Airport Drive Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.		Unit	Sec.	Twp.	Rge.	Is gas actually connected?		When
		B	7	26	4	Yes		4-14-65

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

#### IV. COMPLETION DATA

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth					P.B.T.D.		
Pool	Name of Producing Formation	Top Oil/Gas Pay					Tubing Depth		
Perforations							Depth Casing Shoe		

## TUBING, CASING, AND CEMENTING RECORD

[illegible]

## V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of top oil; must be equal to or exceed top oil available 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.)	<div style="border: 2px solid black; border-radius: 50%; padding: 10px; text-align: center;"> <p><b>RECEIVED</b></p> <p><b>JAN 28 1974</b></p> <p><b>OIL CON. COM.</b></p> <p><b>DIST. 3</b></p> </div>	
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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

E. Geraldine Rogers

Asst. Production Acct.

24, 1974

OIL CONSERVATION COMMISSION

APPROVED

**FEB 7 1974**

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BY Original Signed by Emery C. Arnold

TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

This form is to be filed in compliance with RULF 1104.

If this is a request for allowable for a newly drilled oil or gas well, this form must be accompanied by a tabulation of the depths taken on the well in accordance with GRI 1-191.

All sections of this form must be filled out completely. If unable, on page 2, and be completed by the:

1. The first group of authors (see Table 1) has shown that the use of a single, unidimensional measure of self-esteem is insufficient to capture the complexity of the construct. They have argued that self-esteem is a multidimensional construct, and that the use of multiple measures is necessary to capture its full range of meaning.

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