

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

DISTRIBUTION
NATURAL GAS
OIL
C.O.C.S.
LAND OFFICE
TRANSPORTER
GAS
OPERATION
REGULATION 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

Permisco Oil Company
Address
P. O. Box 1714 Durango, Colorado
Reason for filling (Check proper box)
New Well ☒ Change in Transporter of:
Dry Gas ☐
Casinghead Gas ☐ Condensate ☐
Other (Please explain) Effective First Delivery

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "B"	Lease No. 7	Well No. 7	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal
Location Unit Letter H ; 1890 Feet From The North Line and 1150 Feet From The East Line of Section 16 Township 26N Range 5 W , NMPM, Rio Arriba County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Rock Island Oil and Refining	Address (Give address to which approved copy of this form is to be sent) P. O. Box 328, Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 16	Twp. 26	Rge. 5	Is gas actually connected? No	When On Approval

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 9/4/66	Date Compl. Ready to Prod. 10/6/66	Total Depth 7670	P.B.T.D. 7633					
Deviation (DB, RKB, RT, GR, etc.) 6610 Gr.	Name of Producing Formation Dakota	Top Oil/Gas Pay 7349	Tubing Depth 7563					
Perforations 7349-7580	Depth Casing Shoe 7670							

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	8 5/8"	368	200 SX
7 7/8"	5 1/2"	7668	925 SX

IV. TEST DATA AND REQUEST FOR ALLOWABLE

(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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

GAS TEST

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2074	3 hrs.		
Testing Method (flow, back pr.) Back Pr.	Tubing Pressure	Casing Pressure	Choke Size
	211	755	3/4"

V. 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.

Emery C. Arnold

Emery C. Arnold (Signature)
Supervisor, Production Clerk
(Title)

11/4/66
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 30 1966, 19

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #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.

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