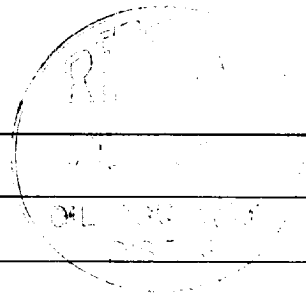


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NEW MEXICO OIL CONSERVATION COMMISSION  
 REQUEST FOR ALLOWABLE  
 AND  
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
 Supersedes Old C-104 and C-110  
 Effective 1-1-65



I. Operator  
**Jerome P. McHugh**  
 Address  
**930 Petroleum Club Bldg., Denver, Colo. 80202**  
 Reason(s) for filing (Check proper box)  
 New Well:  Y  
 Reccomplettion:   
 Change in Ownership:   
 Change in Transporter of:  
 Oil:  Dry Gas:   
 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 <b>Jicarilla</b>	Well No. <b>4</b>	Pool Name, including Formation <b>Basin Dakota</b>	Kind of Lease State, Federal or Fee <b>Ind. Cont.</b>	Lease No. <b>#120</b>
Location Unit Letter <b>L</b> , <b>1530</b> Feet From The <b>South</b> Line and <b>900</b> Feet From The <b>North-West</b> Line of Section <b>31</b> Township <b>20N</b> Range <b>4W</b> , NMPM, <b>Rio Arriba</b> 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"/> <b>Rock Island Oil Co.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 328, Farmington, N. M. 87401</b>			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <b>El Paso Natural Gas Co.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 990, Farmington, N. M. 87401</b>			
If well produces oil or liquids, give location of tanks.	Unit <b>L</b>	Sec. <b>31</b>	Twp. <b>20N</b>	Rge. <b>4W</b>
	Is gas actually connected? <b>No</b> When			

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
		X	X					
Date Spudded <b>5/24/68</b>	Date Compl. Ready to Prod. <b>6/21/68</b>	Total Depth <b>7592'</b>		P.B.T.D. <b>7551'</b>				
Elevations (DF, RKB, RT, GR, etc.) <b>6724' Gr.</b>	Name of Producing Formation <b>Dakota</b>	Top Oil/Gas Pay <b>7361'</b>		Tubing Depth <b>2 3/8" 7525'</b>				
Perforations <b>7361' - 7543'</b>					Depth Casing Shoe <b>7587'</b>			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<b>12 1/4"</b>	<b>8 5/8"</b>	<b>238'</b>	<b>175 sx.</b>
<b>7 7/8"</b>	<b>4 1/2"</b>	<b>7587'</b>	<b>350 sx. 1st stage</b>
			<b>660 cu. ft. 2nd stage</b>
	<b>2 3/8"</b>	<b>7525'</b>	<b>960 cu. ft. 3rd stage</b>

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 <b>5456</b>	Length of Test <b>3 hrs.</b>	Bbls. Condensate/MMCF <b>---</b>	Gravity of Condensate <b>---</b>
Testing Method (pilot, back pr.) <b>one point</b>	Tubing Pressure (shut-in) <b>2402</b>	Casing Pressure (shut-in) <b>2427</b>	Choke Size <b>3/4"</b>

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.

Original signed By **T. A. Dugan**

(Signature)

**Engineer**

(Title)

**7/11/68**

(Date)

OIL CONSERVATION COMMISSION

APPROVED

**JUL 16 1968**

BY **Original Signed by A. R. Kendrick**

TITLE **PETROLEUM ENGINEER DIST. NO. 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.