j.14-26-3

AFFIDAVIT OF DEVIATION SURVEYS

May 20, 1969

Well No. 11	Jicarilla "D"	Total depth: 3892'
Depth	Deviation	
260'	1-1/20	
1355'	10	/ partived/
1950'	1-1/20	MAY 23 1969
2704'	1-3/40	OF COM COM
3439'	10	
3700'	1-1/20	

F. W. FICKLIN

State of Wyoming : County of Natrona : ss.

Before me, Dollie Mackay, a Notary Public in and for the said County and State, this 20th day of May 1969, personally appeared F. W. FICKLIN, who being first duly sworn, deposes and says that he is employed by MOBIL OIL CORPORATION as Drilling Superintendent in charge of the drilling of the above listed well in Rio Arriba County, New Mexico and that he has read over and subscribed the foregoing deviations as being true and correct.

Lole Dinche an Notary Public 1

My commission expires:

January 16, 1972.

1.	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OPERATOR PRORATION OFFICE Operator Mobil Oil Corporation Address P.O.BOX 1652, CASPER.			Supersedes Old C-104 and C-110 Effective 1-1-65 RAL GAS 3 1969 313 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
11	Reason(s) for filing (Check proper box) New We!! Recompletion Change in Ownership If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND I.	Change in Transporter of: Oil Dry Go Casinghead Gas Conde	nsate	
	Lease Name Jicarilla "H" Location Unit Letter "D" : 99	Well No. Pool Name, Including F 11 Gavilan - Pic 0 Feet From The West Lin nship 26N Range	tured Cliffs State	of Lease Federal or Fee Indian 96 et From The North County
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	AS	ch approved copy of this form is to be sent)
	Name of Authorized Transporter of Oil			
	Name of Authorized Transporter of Cas.	^		ch approved copy of this form is to be sent)
	El Paso Natural Gas Co If well produces oil or liquids,	mpany Unit Sec. Twp. Rge.	Box 990 Farmingto Is gas actually connected?	n, New Mexico
	give location of tanks.	1	No	1
If this production is commingled with that from any other lease or pool, give commingling order number:				per:
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover De	epen Plug Back Same Restv. Diff. Restv.
	Designate Type of Completio	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.
	Date Spudded	5-2-69	_	3793'
	11-16-68 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	3843! Top Oll/Gas Pay	Tubing Depth
	GR. 7109', RKB 7122'	Pictured Cliffs	36881	3778 Depth Casing Shoe
	Perforations			
	3688'-3700', 3716'-20'	3/46 -60 3/68 -48 TUBING, CASING, AN	ID CEMENTING RECORD	264'
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	9"	7"	264'	100 Sacks
	612"	31/4"	3840'	50 Sacks
V		OR ALLOWABLE (Test must be able for this	after recovery of total volume of depth or be for full 24 hours)	load oil and must be equal to or exceed top allow
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pur	np, gas lift, etc.)
			Casing Pressure	Choke Size
	Length of Test	Tubing Pressure	Cosmy Prosomo	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF
	GAS WELL			
	Actual Prod. Test-MCF/D 1119	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	5-2-69 CAOF 1745 Testing Method (pitot, back pr.)	3 hours	None Casing Pressure (Shut-in)	Choke Size
		Tubing Pressure (Shut-in)	665#	
.	PROVER OF COMPLIAN	666#	OIL CON	SERVATION COMMISSION
and the information given				MAN 0 0 1000
				ned by Emery C. Arnold
			BY	
			TITLE	SUPERVISOR DIST. #5

TITLE _

(Signature)

(Date)

ປົ. R. Puckett

5-6-69

PRODUCING SUPERINTENDENT

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.