

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OF COPIES DESTROYED	
DISTRIBUTION	
DATE	
BY	
U.S.	
NO OFFICE	
TRANSPORTER	OIL
	GAS
ERATOR	
ORATION OFFICE	
STATOR	

Jerome P. McHugh

Box 208, Farmington, NM 87401

Other (Please explain)

ason(s) for filing (Check proper box)

ew Well ☐
ompletion ☐
ange in Ownership ☐

Change in Transporter of:

Oil ☒ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Effective June 1, 1981

change of ownership give name
d address of previous owner

DESCRIPTION OF WELL AND LEASE

Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
2	Wild Horse Gallup	State, Federal or Fed Ind. Cont.	98

Location: Apache
Unit Letter L : 1650 Feet From The South Line and 790 Feet From The West
Line of Section 18 Township 26N Range 3W, NMPM, Rio Arriba County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1367, Farmington, NM 87401

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
Thriftway Northwest Pipeline Corp. P.O. Box 90, Farmington, NM 87401

If well produces oil or liquids, give location of tanks. Unit L Sec. 18 Twp. 26N Rge. 3W

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations				Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 oil able for this depth or be for full 24 hours)

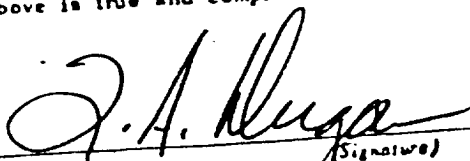
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

1. 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.



Thomas A. Dugan, Agent

OIL CONSERVATION DIVISION

APPROVED

BY

TITLE

6-4 1981, 19
SUPERVISOR DISTRICT # 2
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, lease number, or transporter, or other such change of conditions.