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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLEForm C-104
Supersedes Old C-104 and C-110
Effective 1-1-65AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Jerome P. McHugh

Address

Box 234, Farmington, N. M. 87401

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Tribal	Well No.	2	Pool Name, Including Formation	Basin Dakota	Kind of Lease	State, Federal or Fee	Ind.	Lease No.	#115
Location										
Unit Letter	L	1650	Feet From The	south	Line and	990	Feet From The	west		
Line of Section	9	Township	26N	Range	3W	NMPM,	Rio Arriba	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"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc.	Box 108, Farmington, N. M. 87401
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)
El Paso Natural Gas Co.	Box 990, Farmington, N. M. 87401
If well produces oil or liquids, give location of tanks.	Unit L Sec. 9 Twp. 26N Rge. 3W Is gas actually connected? Yes 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 Res'v.	Diff. Res'v.
		X	X					
Date Spudded	5/3/70	Date Compl. Ready to Prod.	5/26/70	Total Depth	8180'	P.B.T.D.	8136'	
Elevations (DF, RKB, RT, GR, etc.)	7040' Gr.	Name of Producing Formation	Basin Dakota	Top Oil/Gas Pay	7905'	Tubing Depth	8067'	
Perforations	7905'-90', 7918'-22', 7980'-84', 8015'-19', 8054'-60', 8066'-70'						Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	226'	175 SX/					
7 7/8"	4 1/2"	8180'	500 SX.					
	1 1/4"	8067'						

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

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OIL CON. COM.
DIST. 3

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1935	3 hrs.		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
One pt. back press.	2173	2240	3/4"

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
Jim L. Jacobs

(Signature)

Agent

(Title)

8/6/70

(Date)

OIL CONSERVATION COMMISSION

AUG 6 1970

APPROVED

BY Original Signed by Emery C. Arnold

SUPERVISOR DIST. 79

TITLE

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.