## DISTRIBUTION HEW MEXICO OIL CONSERVATION COMMISSION SANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 FILE Effective 1-1-55 AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL IRANSPORTER GAS OPERATOR PRORATION OFFICE Caulkins Oil Company P.O. Box 780, Farmington, New Mexico Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner \_\_\_\_ II. DESCRIPTION OF WELL AND LEASE ell No. Pool Name, Including Formation Kind of Lease Lease No. 342 | South Blanco Pictured Cliffs State, Federal or Fee NMO3553 Fed. Breech North Line and 850 East 1190 Unit Letter Feet From The 26 North Range 6 West Line of Section Township , NMPM, County Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas 🔀 Address (Give address to which approved copy of this form is to be sent) 1508 Pacific Ave., Dallas, Texas Gas Company of New Mexico Sec. P.ge. Is gas actually connected? When If well produces oil or liquids, give location of tanks. Yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Same Restv. Diff. Restv. Plug Back Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. 7-15-75 8-13-75 3989 3<u>989</u> Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oll/Gas Pay Tubing Depth 6667 Gr. Pictured Cliffs 2962 Depth Casing Shoe Perforations 2966-2986 and 3018-3038 TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 8 5/8" 4 1/2" 12 1/4" 138 100 6 3/4" 3989 480 1" 2937 (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) TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pressure Choke Size Actual Prod. During Test Oil-Bbls. Water - Bbls. Gas - MCF 37 3

GAS WELL Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate 510 3 Hours Testing Method (pitot, back pr.) Tubing Pressure (Shnt-in) Casing Pressure (Shut-in) Choke Size Back Pressure 883 3/<u>/."</u>

APPROVED

TITLE

## 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.

Superintendent

(Date)

(Title)

11-6-76

This form is to be filed in compliance with RULE 1104.

OIL CONSERVATION COMMISSION

MOV 22 19/6

By Original Signed by A. R. Kerdrick

SUPERVISOR DIST.

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 cut 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.

Sanarata Forms C-104 must be filed for each nool in multiple