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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
OPERATOR		
PRODUCTION OFFICE		

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-111
Effective 1-1-65

1. Operator
Consolidated Oil & Gas, Inc.

Address
1860 Lincoln Street, Lincoln Tower Building, Denver, Colorado 80295

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 checked="" 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 Jicarilla "C"	Well No. 1-A	Pool Name, Including Formation Pictured Cliffs	Kind of Lease Jicarilla	Contract No. #101
Location Unit Letter "A" ; 790 Feet From The North Line and 790 Feet From The East				
Line of Section 11 Township 26N Range 4W, 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"/> Inland Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1528, Farmington, New Mexico 87401		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Co. of New Mexico	Address (Give address to which approved copy of this form is to be sent) 1st International Bldg., Dallas, Texas 75270		
If well produces oil or liquids, give location of tanks.	Unit "A" Sec. 11 Twp. 26N Rge. 4W	Is gas actually connected? No	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 6-24-77	Date Compl. Ready to Prod. 6-29-78	Total Depth 6150'	P.B.T.D. 6108'					
Elevations (DF, RKB, RT, GR, etc.) 7090' GR	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 3814'	Tubing Depth 3776'					
Perforations Pictured Cliffs 3814-3881' (34 holes)			Depth Casing Shoe 6150'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
15"	10-3/4"	292' KB		300 SX				
8-3/4"	7"	4100' KB		225 SX				
6-1/4"	4-1/2"	6150' KB		210 SX				
	1-1/2"	3776' & 5617'						

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 Pictured Cliffs Zone

Actual Prod. Test-MCF/D AOF-4645; CV-2196	Length of Test 3 hrs.	Bbls. Condensate/MMCF -----	Gravity of Condensate -----
Testing Method (pilot, back pr.) 1 pt potential	Tubing Pressure (Shut-in) 704 psig	Casing Pressure (Shut-in) 704 psia	Choke Size 3/8"

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.

A. J. Rogers Jr.
Vice President, Operations, Gulf Coast-West Tex.

July 17, 1978

OIL CONSERVATION COMMISSION

APPROVED SEP 13 1978, 19____
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR DIST. #2

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 recompleted wells.