

OIL CONSERVATION DIVISION

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

Form C-104
Revised 10-1-78

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | | |
|------------------------|-----|--|
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| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

I. Operator
Caulkins Oil Company

Address
P.O. Box 780 Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|------------------|--|---|----------------------|
| Lease Name Breech "E" | Well No. 89-E | Pool Name, including Formation Basin Dakota | Kind of Lease State, Federal or Fee Federal | Lease No. NM03551 |
| Location Unit Letter E ; 1625 Feet From The North Line and 790 Feet From The West Line of Section 3 Township 26 North Range 6 West , 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"/> Giant Refinery Company | Address (Give address to which approved copy of this form is to be sent) P.O. Box 256 Farmington, New Mexico | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico | Address (Give address to which approved copy of this form is to be sent) 1508 Pacific Ave. Dallas, Texas | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit E | Sec. 3 | Twp. 26N | Rge. 6W | 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 7-5-85 | Date Compl. Ready to Prod. 9-10-85 | Total Depth 7536' | P.B.T.D. 7536' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6532' GR | Name of Producing Formation Dakota | Top Oil/Gas Pay 7389' | Tubing Depth 7536' | | | | | |
| Perforations 7271' to 7496' (Dakota) | Depth Casing Shoe 7536' | | | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|---------------------------|
| 12 1/4" | 9 5/8" | 432' | 250 Sacks (321.50 Cu.Ft.) |
| 7 7/8" | 5 1/2" | 7536' | 1300 Sacks (2004 Cu.Ft.) |
| | 1 1/4" | 7389' | |

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. |

GAS WELL

| | | | |
|---|-----------------------------------|----------------------------------|-----------------------|
| Actual Prod. Test-MCF/D 2,195 | Length of Test 3 Hours | Bbls. Condensate/MCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) Back Pressure | Tubing Pressure (Shut-In) 1657 | Casing Pressure (Shut-In) PKR | Choke Size 3/4" |

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.

Charles E. Vergara
(Signature)
Superintendent
(Title)
9-18-85
(Date)

OIL CONSERVATION DIVISION

APPROVED _____
BY _____
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.