

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Hixon Development Company

P.O. Box 2810, Farmington, New Mexico 87499

RECEIVED

MAR 14 1984

OIL CON. DIV.
DIST. 3

Reason(s) for filing (check proper box)

New Well ☐

Recompletion ☐

Change in Ownership ☐

Change in Transporter of:

Oil ☒

Dry Gas ☐

Casinghead Gas ☐

Condensate ☐

Other (if lease explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease State, Federal or Free	State	Lease No.
Central Bisti Unit	44	Bisti Lower Gallup			E-6597

Location
Unit Letter F : 1980 Feet From The north Line and 1979 Feet From The west
Line of Section 16 Township 25 North Range 12 West , NMPM, San Juan County, County

SIGNATURE 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)
Ciniza Pipeline	P.O. Box 940, Bloomfield, New Mexico 87413

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 990, Farmington, New Mexico 87499

Well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

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	Some Res'tv.	Diff. Res'tv.
Stake Spudded								
Deviation (DF, RAE, RT, CR, etc.)								
Other Deviations								

Date Compl. Ready to Prod.	Total Depth	P.B.T.D.

Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth

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 fluid oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Test Method (Flow, Pump, etc.)	Date of Test	Producing Method (Flow, Pump, etc.)
Rate First New Oil Run To Tanks		
Length of Test	Tubing Pressure	Casing Pressure
Test Prod. During Test	Oil - Bbls.	Water - Bbls.

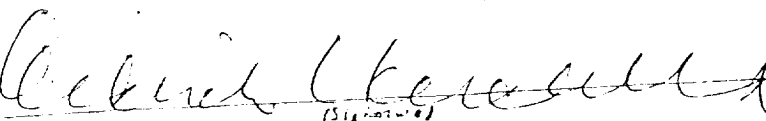
Core Size

GAS WELL

Test Method (Flow, Pump, etc.)	Length of Test	Producing Method (Flow, Pump, etc.)
Actual Prod. Test - MCF/D		
Tubing Pressure (psig-lb)		Casing Pressure (psig-lb)
		Core Size

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.


(Signature)

Petroleum Engineer

(Title)

3/8/84

(Date)

OIL CONSERVATION DIVISION

MAR 14 1984

APPROVED _____, 19

Original Signed by CHARLES GHOLSEN

BY _____

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

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.