

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Giant Exploration & Production Company	Well API No.	30-045-22709
Address	P.O. Box 2810, Farmington, New Mexico 87499		
Reason(s) for Filing (Check proper box)	<input type="checkbox"/> Other (please explain)		
New Well	<input type="checkbox"/>	Change in Transporter of:	<input type="checkbox"/>
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Operator	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Gle Na Nup Pah	1	WAW Fruitland Sand - Pictured Cliffs	State, Federal or Fe-Navajo	14-20-603-323
Location				
Unit Letter	I	: 1850 Feet From The South Line and	790 Feet From The East Line	
Section	5	Township 25N Range 12W	NMPM, San Juan	County

III. DESIGNATION 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)
<input type="checkbox"/>	
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Giant Exploration & Production Co. <input type="checkbox"/> <input checked="" type="checkbox"/>	P.O. Box 2810, Farmington, NM 87499
If well produces oil or liquids, give location of tanks	Unit Sec. Twp. Rge. Is gas actually connected? When?
	Yes 08-17-78

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
Date Spudded	Date Compl. Ready to Prod.				Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay	Tubing Depth		
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET	SACKS CEMENT		

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 Tank	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

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	

VI. OPERATOR 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	
Jeffrey R. Vaughan	Vice President Operations
Printed Name	Title
AUG 24 1993	(505)326-3325
Date	Telephone No.

OIL CONSERVATION DIVISION

AUG 25 1993

Date Approved

By

Title

SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation test taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.