

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Hixon Development Company

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

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of:
Oil ☒ Oil ☐ Dry Gas ☐
Accomplishment ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐

Other (Please 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	Navajo	Lease No.
Central Bisti Unit	73	Bisti Lower Gallup	State, Federal or Fee	Allotted	14-20-603

Location: Section 0, Township 8, Range 25 North, Line and 1650 Feet From The south Line and 1650 Feet From The east
Line of Section 8, Township 25 North, Range 12 West, NMPM, San Juan County

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)
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

Is gas actually connected? ☐ When: _____

Designate Type of Completion - (X) ☒ Oil Well ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Some heavy ☐ Diff. Res'tv.

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Deviation (DF, FAE, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Depth Casing Shoe

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

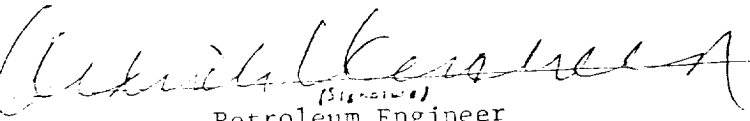
TEST DATA AND REQUEST FOR ALLOWABLE

Test Type (Flow, Pump, etc.)	Date of Test	Producing Method (Flow, Pump, etc.)
Test Type	Date of Test	Producing Method
Length of Test	Tubing Pressure	Casing Pressure
Oil - Bbls.	Water - Bbls.	Gas - MCF

Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (Flow, Back pr.)	Testing Pressure (shot-in)	Casing Pressure (shot-in)
		Casing 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 _____
BY Original Signed by CHARLES GHOLSON
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.