

DATE	
FILE	
CLASS	
FILED OFFICE	
TRANSPORTED	
OPERATOR	
REGISTRATION OFFICE	
CR-1001	

SANTA FE, NEW MEXICO 87401

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASAZ
3666-R

Hixon Development Company

Address

P.O. Box 2810, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

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

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Central Bisti	Well No.	79	Pool Name, including Formation	Bisti Lower Gallup	Kind of Lease	State, Federal or Fee	Federal	Lease No.	SF078056
	Lower Gallup Unit									

Location

Unit Letter F : 1980 Feet From The north Line and 2100 Feet From The west

Line of Section 5 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 87401
If well produces oil or liquids, give location of tanks.	Unit : C Sec. : 5 Twp. : 25N Rge. : 12W
	Is gas actually connected? : NO 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 ☐ Same Restv. ☐ Diff. Restv. ☐		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
5/13/82	6/3/82	5060'	5010'
Deviation (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6155' GLE	Bisti Lower Gallup	4784'	4674'
Perforations			Depth Casing Shoe
4810'-4784'			5057'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	216'	135 sacks
7-7/8"	4-1/2"	5057'	525 sacks
	2-3/8"	4674'	

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.)	
6/3/82	6/29/82	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	45.6	0	14

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Cementing Method (pneum. back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke 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
is true and complete to the best of my knowledge and belief.

Petroleum Engineer
(Title)

July 2, 1982
(Date)

OIL CONSERVATION DIVISION

JUL 6 1982

APPROVED _____, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 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 allow-
able 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.