NEW MEXICO OIL CONSERVATION COMMISSION Florm C+104 Distinguished Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE SANTAFE Littertive 1-1-65 VIIIV FILE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS U.S.G.S. LAND OF FICE OIL TRAL CORTER GAS GPERATUR PHONATION OF FICE اددادد احرار) SEP 101332 M. J. BRANNON OR CON. LOM. 3417 Hulen Street - Suite 124 Ft. Worth, Texas 76024 DIST, 3 Other (l'Iruse explain) Reason(s) for filing (Check proper box) Change in Transporter of: X Hew Wall Dry Gas CII Recompletion Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner I. DESCRIPTION OF WELL AND LEASE Lease No. Well No. | Pool Name, Including Formation Federal State, Federal or Fee 2 Basin Dakota Federal 28 078309 Lecation 790 West North Line and ___ Feet From The 1850 Feet From The Unit Letter 9W San Juan County 25N , NMPM, Range Township I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate P.O.Box 489, Bloomfield, N.M. 87413 Plateau, Inc. Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas ____ or Dry Gas ___ P.O. Box 990 Farmington, N. M. 87401 El Paso Natural Gas Company When Is gas actually connected? Sec. Unit If well produces all or liquids, give location of tanks. 25N 9W No · 28 Ε If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Plug Back | Same Resty. Diff. Resty. New Well Gas Well Workover Oil Well Designate Type of Completion - (X) Х X P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded 6511' 6550 t 8/18/82 7/24/82 Top Oll/Gas Pay Elevations (DF, RKB, RT, GR, etc.) 6673 G.L. Name of Producing Formation 5100' 6348' Dakota Depth Casing Shoe 6550° Ferforations 6375'-6392'; 6395'-6397'; 6415'-6419' TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 8-5/8" 270**'** 270 sacks 12-1/4" 4-1/2" 6550' 2090 sacks 7-7/8" 6348' 2-3/8" (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) V. TEST DATA AND REQUEST FOR ALLOWABLE Producing Method (Flow, pump, gos lift, etc.) OIL WELL Date of Test Date Fire: New Oil Run To Tanks Choke Size Cosing Pressue Tubing Pressure Length of Test Cos - MCF Woter - Bble. Cil-Bble. Actual Pred. During Test GAS WELL Actual Frod. Tool-MCF/D Gravity of Condensate Bile. Condensate/MMCF Length of Test -0-3 hrs. Tubing Pressure (Shut-in) 3/4"THC-890; CAOF-934 Cosing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) 3/4" 1520 150<u>0</u> Back Pressure OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE SEP 1 6 1982 APPROVED I hereby certify that the rules and regulations of the Oil Conservation Original Signed by FRANK T. CHAVEZ Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. BY. SUPERVISOR DISTRICT # 3 TITLE . M. J. BRANNON

ORIGINAL SIGNED BY

EWELL N. WALSH

(Title)

(Dute)

Ewell N. Walsh PE (Signature) President

Walsh Engineering & Prod. Corp.

9/9/82.

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a nawly drilled or deep 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-sble on new and recompleted wells.

Fill out only Sections 1. II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Seperate Forms C-104 must be filed for each pool in multiply completed wells.