

Oil Conservation Division  
Form No. 10-1-70  
Request for Allowable  
Authorization to Transport Oil and Natural Gas

OIL CONSERVATION DIVISION

Revised 10-1-70

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

304/17/13

RECEIVED

JUL 18 1983

OIL CON. DIV  
DIST. 3

Operator Hixon Development Company

Address P.O. Box 2810, Farmington, NM 87499

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	OIL CON. DIV DIST. 3	
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>			

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE		Lease No.	
Lease Name A.P. Hixon	Well No. 1	Pool Name, including Formation Bisti Lower Gallup	20-5242
Location			
Unit Letter E : 1850 Feet From The north Line and 880 Feet From The west			
Line of Section 21 Township 25N Range 11W , NMPM, San Juan County			

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 <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Transportation Refining	P.O. Box 256, Farmington, NM 87499		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EPG	Address (Give address to which approved copy of this form is to be sent) PO Box 990 - Farmington NM 87499		
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 21	Twp. 25N Rge. 11W
		Is gas actually connected? When	
		No	

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 5/03/83	Date Compl. Ready to Prod. 6/23/83	Total Depth 6026'	P.B.T.D. <del>6126' - 5260'</del> 5993								
Elevations (DF, RKB, RT, CR, etc.) 6517' KB	Name of Producing Formation Lower Gallup	Top Oil/Gas Pay 4960'	Tubing Depth 4876' KB								
Perforations 4976'-4992' (2JSPF) 32 holes		Depth Casing Shoe									

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	437'	275 sacks
7-7/8"	5-1/2"	6026' KB	700 sacks
	2 3/8	4876	

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 6/23/83	Date of Test 7/14/83	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 12 hours	Tubing Pressure	Casing Pressure	Choke Size 0.500"
Actual Prod. During Test	Oil-Bbls. 28	Water-Bbls. 14	Gas-MCF 10.1

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

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	
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.		9-1-83	
		APPROVED	
		SEP 1 - 1983	
BY Original Signed by FRANK T. CHAVEZ		TITLE SUPERVISOR DISTRICT # 3	
Petroleum Engineer		This form is to be filed in compliance with RULE 1104.	
7/15/83		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.	
(Date)		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.	