NO. OF COMES RECT	IVED	
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G. <b>S.</b>		
LAND OFFICE		
IRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

2/29/84

(Date)

DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104		Form C-104 Supersedes Old C-104 and C-110	
SANTA FE	REQUEST FOR ALLOWABLE Supersedes Old C-104 and Effective 1-1-65 AND		•	
U.S.G.S.	ALITHODIZATION TO TRAN	NSPORT OIL AND NATURAL	GAS:	
LAND OFFICE	AUTHORIZATION TO TRAI	131 OKT OIL AND HATOKAL	- 1 M	
IRANSPORTER OIL	7	7 F	80 n	
GAS		クリ		
OPERATOR	_			
PRORATION OFFICE			M P	
Hicks Oil & Gas	Inc			
Address	, Inc.		AT THE W	
P.O. Drawer 330		87499	MARRIA	
Reason(s) for filing (Check proper be	ox)	Other (Please explain)	OIL CON. DIV.	
New We!!	Change in Transporter of:  Oil Dry Gas		CON D'	
Recompletion Change in Ownership	Casinghead Gas Condens	75	DIST DIV.	
Change in Ownership				
If change of ownership give name and address of previous owner				
and address of previous owner				
DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo.	rmation Kind of Le	Lease No.	
Lease Name		State Fede	ergl or Fee State E3148	
Bisti State Com	l Bisti Gallup E	ixt.	5000	
	30 Feet From The South Line	and 330! Feet From	m The West	
Unit Letter M : 3	JV Pecci from the jimiteli Sino			
Line of Section 2	Township 25N Range 1	3W , NMPM, San	Juan County	
	THE STATE OF THE S	<b>.</b>		
Name of Authorized Transporter of C	RTER OF OIL AND NATURAL GAS	Address (Give address to which app	proved copy of this form is to be sent)	
Giant Refining		PO Box 256 Far	mington, New Mexico 87499	
Name of Authorized Transporter of C	Casinghead Gas or Dry Gas	Address (Give address to which app	proved copy of this form is to be sent)	
If well produces oil or liquids,	Unit Sec. Twp. Pge.	Is gas actually connected?	When	
give location of tanks.	M 2 25N 13W	No		
If this production is commingled	with that from any other lease or pool, a	give commingling order number:		
. COMPLETION DATA		New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
Designate Type of Comple	tion = (X)	v		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
1/30/84	2/25/84	5050 Top Oil/Gas Pay	5006 Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.		1		
	Gallup	4911'	4833 Depth Casing Shoe	
Perforations (0.11, 1.7, (0.22, /			5040'	
4911-17; 4932-4	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12½	8 5/8 - 24	225	160 sx	
7 7/8	$4\frac{1}{2} = 10.5$	5039	650 sx	
	2 3/8	4833		
	TOP ALLOWARIE (Test must be g	feer recovery of total volume of load	oil and must be equal to or exceed top allow	
. TEST DATA AND REQUEST OIL WELL	able for this de			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga.	s lift, etc.)	
2/25/84	2/27/84	Pump Casing Pressure	Choke Size	
204 01 1 00			NA	
24 hrs.	25 psi	25 psi Water-Bbls.	Gas - MCF	
Actual Prod. During Test	47	4	41	
GAS WELL		1-11-2-1	Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Glarity of Commentation	
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	I mild Pressure ( Sinc-11)			
	ANGE	OIL CONSER	VATION COMMISSION	
I. CERTIFICATE OF COMPLIA	INCE	2.1.6		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED		
		Original Signed by FRANK T. CHAVEZ		
		TITLESUPERVISOR DISTRICT 第 3		
		-	in compliance with RULE 1104.	
			illowable for a newly drilled or deepens mpanied by a tabulation of the deviation of the de	
(S	ilgnature)			
President	(Tisla)	All sections of this form	nust be filled out completely for allow i wells.	
	(Title)	Spre on new eng . soombiese.	or A TIT for changes of owner	

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. able on new and recompleted