

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS30-3/11  
10-4-84

Hixon Development Company

Address

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

Person(s) for filing ((check proper box))

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

1st delivery of gas  
8-17-84RECEIVED  
OCT 01 1984  
OIL CON. DIV  
DIST. 3If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

| Lease Name  | Well No. | Pool Name, Including Formation | Kind of Lease<br>State, Federal or Fee | Lease No. |
|-------------|----------|--------------------------------|----------------------------------------|-----------|
| Carson Unit | 24       | Bisti Lower Gallup             | Federal                                | NM 07032  |

Location

Unit Letter N : 1090 Feet From The South Line and 1550 Feet From The WestLine of Section 15 Township 25N Range 12W , NMPM, San Juan County

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |      |      |      |                            |         |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|------|------|------|----------------------------|---------|
| Ciniza Pipeline                                                                                                          | P.O. Box 940, Farmington, New Mexico                                     |      |      |      |                            |         |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | 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                                     |      |      |      |                            |         |
| If well produces oil or liquids,<br>give location of tanks.                                                              | Unit                                                                     | Sec. | Twp. | Rgs. | Is gas actually connected? | When    |
|                                                                                                                          | P                                                                        | 13   | 25   | 12   | Yes                        | 8-17-84 |

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 | Some Rea'v. | Diff. Res. |
|---------------------------------------------------------------------------|-----------------------------|-----------------|--------------|----------|--------|-----------|-------------|------------|
|                                                                           | X                           |                 | X            |          |        |           |             |            |
| Date Spudded                                                              | Date Compl. Ready to Prod.  | Total Depth     | P.B.T.D.     |          |        |           |             |            |
| 7/20/84                                                                   | 8/7/84                      | 4936' KB        | 4894' KB     |          |        |           |             |            |
| Elevations (DF, RKB, RT, GR, etc.)                                        | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |          |        |           |             |            |
| 6259' GLE                                                                 | Lower Gallup                | 4710'           | 4594'        |          |        |           |             |            |
| Perforations                                                              | Depth Casing Shoe           |                 |              |          |        |           |             |            |
| 4814' - 4820', 4786' - 4798', 4768' - 4778', 4742' - 4750', 4710' - 4720' | 4936'                       |                 |              |          |        |           |             |            |

## TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT          |
|-----------|----------------------|-----------|-----------------------|
| 12-1/2"   | 8-5/8"               | 235'      | 170 sks - 201 cu.ft.  |
| 7-7/8"    | 5-1/2"               | 4936'     | 700 sks - 2206 cu.ft. |
|           | 2 3/8"               | 4594'     |                       |

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)

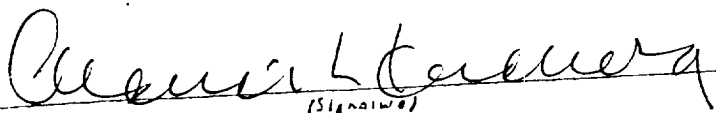
| Date First New Oil Run To Tanks | Date of Test    | Producing Method (Flow, pump, gas lift, etc.) |            |
|---------------------------------|-----------------|-----------------------------------------------|------------|
| 8/7/84                          | 8/27/84         | pumping                                       |            |
| Length of Test                  | Tubing Pressure | Casing Pressure                               | Choke Size |
| 24 hrs.                         |                 |                                               |            |
| Actual Prod. During Test        | Oil - Bbls.     | Water - Bbls.                                 | Gas - MCF  |
|                                 | 82              | 62                                            | 30         |

## GAS WELL

| Actual Prod. Test - MCF/D       | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
|---------------------------------|---------------------------|---------------------------|-----------------------|
| Testing Method (pool, back pr.) | Tubing Pressure (stat-in) | Casing Pressure (stat-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 above is true and complete to the best of my knowledge and belief.



Petroleum Engineer

September 26, 1984

(Date)

## OIL CONSERVATION DIVISION

OCT 01 1984

APPROVED \_\_\_\_\_, 19

BY Original Signed by FRANK T. HANEZ

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 allowable on new and recompleted wells.

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

Separate Forms C-104 must be filed for each pool in multiple completed wells.