

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Hixon Development Company	
Address	P.O. Box 2810, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)	
<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Betsy Geiger	1	Bisti Gallup	State, Federal or Fee Federal NM	25446
Location				
Unit Letter	D	660	Feet From The North	Line and 330
Line of Section		18	Township	25 North
Range		12 West	, NMPM, San Juan	
County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

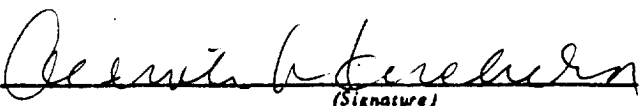
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
The Mancos Corporation	P.O. Box 1320 Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	D	18	25N	12W	No	

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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.

  
(Signature)  
Petroleum Engineer

(Title)

11-18-85

(Date)

OIL CONSERVATION DIVISION  
NOV 19 1985

APPROVED

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

TITLE

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 transporter, or other such change of condition.

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

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OIL CON. DIV.  
DIST.

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## IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XXX		XXXXX					
Date Spudded 9-1-85	Date Compl. Ready to Prod. 11-4-85		Total Depth 5230' KB			P.B.T.D. 5182.17' KB			
Elevations (DF, RKB, RT, GR, etc.) 6480' GLE	Name of Producing Formation Bisti Gallup		Top Oil/Gas Pay 4934'			Tubing Depth 4908'			
Perforations 4934'-4940', 5042'-5050', 5072'-5078', 5088'-5096', 5104'-5112'						Depth Casing Shoe 5227.31' KB			
<b>TUBING, CASING, AND CEMENTING RECORD</b>									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12-1/4"	8-5/8"		312.87'			See Below			
7-7/8"	5-1/2"		5227.31'						
	2-3/8"		4908'						

## V. TEST DATA AND REQUEST FOR ALLOWABLE (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 11-4-85	Date of Test 11-14-85	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hour	Tubing Pressure	Casing Pressure 23 psi	Choke Size 1/2"
Actual Prod. During Test 69	Oil - Bbls. 67	Water - Bbls. 2	Gas - MCF 26

## GAS WELL

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

## Cementing Record:

### Casing

8-5/8"

5-1/2"

### Sacks of Cement

190 sks (224.2 cu.ft.) Class "B" with 2% CaCl

400 sks (1560 cu.ft.) Class "B" with 3% Metasilicate and 1/4#/sk cellophane flakes.  
200 sks (236 cu.ft.) Class "B" containing 2% CaCl and 1/4#/sk cellophane flakes.