

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
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JUL 21 1987
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Hixon Development Company

Address
P.O. Box 2810, Farmington, N.M. 87499

Reason(s) for filing (Check proper box)

<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

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name George Turpin	Well No. 1	Pool Name, including Formation Bisti Lower Gallup	Kind of Lease Federal State, Federal or Fee	Lease No. NM51014
Location Unit Letter <u>K</u> ; <u>1980'</u> Feet From The <u>South</u> Line and <u>1650'</u> Feet From The <u>West</u> Line of Section <u>26</u> Township <u>25 North</u> Range <u>12 West</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

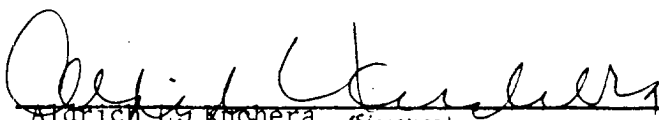
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1429, Bloomfield, N.M. 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> 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 K 26 25 12 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.


Adrich E. Kuchera (Signature)
President
July 20, 1987 (Date)

OIL CONSERVATION DIVISION

APPROVED JUL 21 1987
BY Original Signed by FRANK T. CHAVEZ
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 transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X					
Date Spudded 6-1-87	Date Compl. Ready to Prod. 6-24-87		Total Depth 4925' KB		P.B.T.D. 4886.20' KB				
Elevations (DF, RKB, RT, GR, etc.) 6360' GLE	Name of Producing Formation Bisti Lower Gallup		Top Oil/Gas Pay 4600'		Tubing Depth 4552' KB				
Perforations 4606'-4616' and 4702'-4712'						Depth Casing Shoe 4929' KB			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8"		263' KB		See Below				
7-7/8"	5-1/2"		4929' KB		See Below				

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 6-24-87	Date of Test 6-27-87	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure 29 psig	Choke Size
Actual Prod. During Test 63	Oil - Bbls. 63	Water - Bbls. 0	Gas - MCF 14.4

GAS WELL

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

Cementing Record:

8-5/8" Casing - 170 sks (200.60 cu. ft.) Glass "B" cement containing 2% CaCl_2

5-1/2" Casing - 400 sks (1576 cu. ft.) Class "B" cement containing 3% Thrifty-Lite and 1/4#/sk cellophane flakes. Tailed in with 200 sks (236 cu. ft.) of Class "H" cement containing 1% CF-14 and 1/4#/sk cellophane flakes.