

CONFIDENTIAL

300-6111

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

Form C-104  
Revised 10-01-78  
Format 06-01-83  
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JAN 12 1988

I. Operator  
Hixon Development Company

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

Reason(s) for filing (Check proper box) Other (Please explain)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinthead Gas	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership			

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Karen Hixon	Well No. 1	Pool Name, including Formation Bisti Lower Gallup Ext.	Kind of Lease State, Federal or Fee State	Lease No. 1-2260
Location Unit Letter <u>A</u> ; <u>500</u> Feet From The <u>North</u> Line and <u>400</u> Feet From The <u>East</u> Line of Section <u>36</u> Township <u>25N</u> Range <u>12W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

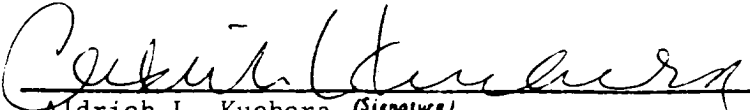
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Conoco	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1429, Bloomfield, New Mexico 87413				
Name of Authorized Transporter of Casinthead Gas <input type="checkbox"/> 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 A	Sec. 36	Twp. 25	Rge. 12	Is gas actually connected? <input type="checkbox"/> when 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.

  
Aldrich L. Kuchera (Signature)  
Petroleum Engineer (Title)

January 11, 1988 (Date)

OIL CONSERVATION DIVISION

APPROVED JAN 12 1988  
BY Original Signed by FRANK T. CHAVEZ  
SUPERVISOR DISTRICT #4

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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IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover	Deepen	Plug Back	Some Res'v.	Diff. Res'v.
Date Spudded 12-2-87	Date Compl. Ready to Prod. 12-24-87		Total Depth 4950' KB		P.B.T.D. 4899' KB			
Elevations (DF, RKB, RT, CR, etc.) 6401' GLE	Name of Producing Formation Bisti Gallup		Top Oil/Gas Pay 4642' KB		Tubing Depth 4717' KB			
Perforations 4756' - 4766'					Depth Casing Shoe 4946.66' 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"	4946.66' KB	See below
	2-3/8"	4717' KB	

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)  
OIL WELL

Date First New Oil Run To Tanks 12-24-87	Date of Test 1-5-88	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure 35 psi	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 224 bbls	Water - Bbls. 12.8 - load fluid	Gas - MCF 80 mcf

recovery

GAS WELL

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

CEMENTING RECORD:

Surface Casing - Cemented surface casing using 175 sks (206.5 cu. ft.) of Class "B" cement with 2% CaCl<sub>2</sub>.

Production Casing - Mixed and pumped 400 sks (932 cu. ft.) of Class "B" cement containing 3% Thrifty-Lite and 1/4#/sk Cello-Seal. Tailed in with 200 sks (236 cu. ft.) of Class "H" containing 1% CF-9 and 1/4#/sk Cello-Seal.