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Appropriate District Office
DISTRICT I
P.O. Box, 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

3006 IN

DISTRICT III 1000 Rio Brazos Rd., Azicc, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

1.	TOTRA	WOLOW! OIL	אוו טווא.	TUMAL GA					
Operator				Well API I			No.		
Giant Exploration & Production Company					3(0-045-2802	3		
Address									
P.O. Box 2810, Farmin	gton, N.M. 87	499 (505	5)326-33	25				Ī	
Reason(s) for Filing (Check proper box)				cr (Please expla	in)		· · · · · · · · · · · · · · · · · · ·		
New Well	Change in	Transporter of:						1	
Recompletion Dry Gas									
Change in Operator Casinghead Gas Condensate									
If change of operator give name			······································						
and address of previous operator	· · · · · · · · · · · · · · · · · · ·		······································						
II. DESCRIPTION OF WELL	AND LEASE								
Lease Name Well No. Pool Name, Includin					Kind	nd of Lease No.			
Alamo Wash 34/ 32-55 Bisti Lov			· .			State, (Federal) or Fee NM		857	
Location				<u></u>			1 1111 7 0		
	1065		N	. 001			г,		
Unit LetterG	1905	Feet From The	IV Lin	c and	FoF	et From The	E	Linc	
Section 34 Townshi	- 2 EN	D 1177		um (C	т				
Section 34 Townshi	p 25N	Range 11W	, N	MPM, Sar	ı Juan			County	
III DESIGNATION OF TO AN	ים מה משדעות מפ	דו אווא אוא מוא	ይል፤ <i>ሮ</i> ጳድ						
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent)								nt)	
Giant Refining Name of Authorized Transporter of Casinghead Gas or Dry Gas				Box 256, Farmington, N.M. Address (Give address to which approved copy of this form is to be sent)					
Traine or Audionized Transporter of Casin	Enterior Cas	or Dry Gas	Vocaces (O)	e adaress to wh	ich approved	copy of this form	15 10 UC SC.	u)	
If well produces oil or liquids,	Unit Sec.	Thun I D.	10 000	u connection	1310	2			
		1 Wp. Rgc. 25N 11W				hen ?			
If this production is commingled with that		·	No No				·	J	
IV. COMPLETION DATA	from any other lease or	poor, give comming.	ing office num					····	
TI. COM BEHON DATA	Oil Well	· Gas Well	New Weli	l Wasterna	D	Dive De de Con		bite Bash	
Designate Type of Completion		1 Oas well	I X	Workover	Deepen	Plug Back Sar	ne Kez A	Diff Res'v	
Date Spudded	Date Compl. Ready to	Prod.	Total Depth	<i>ــــــــــــــــــــــــــــــــــــ</i>	<u> </u>	P.B.T.D.		J	
10–18–90 11–29–90			1						
Elevations (DF, RKB, RT, GR, etc.)			5195 Top Oil/Gas Pay			5146.15'			
			•			Tubing Depth			
6647' GLE Gallup Perforations			4984			5047'			
				_	_	Depth Casing St	100		
4984'-4990', 4992'-49									
TUBIŅG, CASING AND (CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12-1/4"	8-5/8"		578.34'		350 sks				
7-7/8"	5-1/2"		5188.97'			730 sks			
	2-3/8'	f	5047 '						

V. TEST DATA AND REQUES	T FOR ALLOWA	BLE	<u> </u>			J			
~	ecovery of total volume		be eaual to or	exceed top allos	wable for this	depth or be for fi	ull 24 hour.	r.)	
Date First New Oil Run To Tank	Date of Test	, , , , , , , , , , , , , , , , , , , ,		thod (Flow, pur				,	
			_			,		1	
1/- 29-90	12-28-90		Pumping Casina Personal			Choke Size			
Length of Test	Tubing Pressure		Casing Pressure						
24 hrs.	50		50			1/8" Gas- MCF			
Actual Prod. During Test	od. During Test Oil - Bbls.		Water - Bbls.			†			
			0			20			
GAS WELL D	EUEIV								
Actual Prod. Test - MCF/D	Length of Test	ILI	Bbls, Conden	sate/MMCF		Gravity of Cond	cnsate		
UU UU	•		Boil. Collect		•	, , , , , , , , , , , , , , , , , , ,			
Fosting Method (pitot, back pr.)	Tubing Pressure (Shut	in)	Casing Press	in: (Shul-in)		Choke Size			
tosting recurou (plan, both pr.)	1	ΣΪV	C45126 1 1000	10 (01104 111)		0.020 020			
	/ 	<u> </u>]			1			
VI. OPERATOR CERTIFIC				NI CON	SEBV	ATION DI	VISIO	NI	
I hereby certify that the rules and regulations of the Oil Conservation			OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief			Date Approved JAN 14 1991						
is true and complete to the best of my knowledge and belief.				Approved	<u> السا</u>	111 7 3 10	,		
(/2 - /									
(les beneda				By Original Signed by FRANK T. CHAVEZ					
Signature			Py		· · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
Aldrich L. Kuchera President Printed Name Title			Title	Title SUPERVISOR DISTRICT #3					
Printed Name 1 1 1991 (505) 326-3325				3615	MAISOK.	UISTRICT#	<u>త</u>		
Date		0-3325 phone No.							
	Cicles and the second constitution and		1						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.