Submit 5 Cories
Appropriate District Office
DISTRICT 1
P.O. D. x 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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

I.

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I. Operator	TO TR	ANSPORT OF	L AND NATURAL G	AS				
Giant Exploration &		Well	Well API No. 30-045-28559					
Address P.O. Box 2810, Farm	ington, NM	87499						
Reason(s) for Filing (Check proper box)			Other (Please exp	olain)				
New Well X	Change	in Transporter of:		,				
Recompletion	Oil L	Dry Gas						
Change in Operator If change of operator give name	Casinghead Gas	Condensate						
and address of previous operator								
II. DESCRIPTION OF WELL	AND LEASE							
Lease Name West Bisti Coal 25	Well No	Pool Name, Includ Basin Fru	IT I STATE OF THE		of Lease Federal or Fee	f Lease No. Federal or Fee NM 61273		
Location	1200							
Unit Letter B	_ :1200	_ Feet From The _N	North Line and 185	0. Fo	et From The _	East	Line	
Section 25 Townsh	ip 25N	Range 13W	, NMPM,	San Juan			County	
III. DESIGNATION OF TRAN	SPORTER OF (II. AND NATE	DAT CAC					
Name of Authorized Transporter of Oil	or Conde	ensate	Address (Give address to w	hich approved	come of this fo	em is to be a		
	Address (Give address to which approved copy of this form is to be sent)							
Name of Authorized Transporter of Casin	Address (Give address to which approved copy of this form is to be sent)							
Giant Exploration & Production Company If well produces oil or liquids, Unit Sec. Two. Rec.			P.O. Box 2810, Farmington, NM 87499					
give location of tanks.	1	Twp. Rgc.	no	When	?			
If this production is commingled with that IV. COMPLETION DATA	from any other lease of $\frac{28}{}$	r pool, give comming! $1/633$	ling order number:					
Designate Type of Completion	- (X) Oil We	II Gas Well	New Well Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded 28-91	Date Compl. Ready to Prod.		Total Depth	-l	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	10-11-91		12891		1262.30'			
6395' GLE	Name of Producing Formation Basin Fruitland Coal		Top Oil/Gas Pay 1162 *		Tubing Depth 1201			
Perforations			1102	Depth Casing Shoe				
1162' - 1181'					Dopai Casing	51100		
			CEMENTING RECOR	·				
HOLE SIZE 8-3/4"	CASING & TUBING SIZE		DEPTH SET	S	SACKS CEMENT			
6-1/4"	4-1/2"		130'		See Exhibit "A"			
	1/2		1288.4'		See Exhibit "A"			
	110				100 pa 100		372 725	
V. TEST DATA AND REQUES	T FOR ALLOW	ABLE	I				<u> </u>	
OIL WELL (Test must be after r Date First New Oil Run To Tank	ecovery of total volume	of load oil and must	be equal to or exceed top allo	owable for	depth or be fo	r full 24 hou	rs.)	
Date First New Oil Run 10 lank	Date of Test		Producing Method (Flow, pump, gas lift, e			(c.) MAR1 9 1993		
Length of Test	Tubing Pressure		Casing Pressure			13.1		
	Troing Tressure		Casing ressure	one con. Div				
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.		Gas- Mer			
GAS WELL	<u> </u>							
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF		Gravity of Co	ndensate		
U	24 hours		0		N/A			
Testing Method (pitot, back pr.)				Casing Pressure (Shut-in)		Choke Size		
back pressure	0		0		1/4"			
VI. OPERATOR CERTIFIC	ATE OF COM	PLIANCE	011 001	1000	TIONE			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above			OIL CONSERVATION DIVISION					
is true and complete to the best of my knowledge and belief.			Date Approved MAR 1 9 1993					
. 11 ~ -	Date Approved							
Signature Columnia			By_ Bin) dun/					
W John C. Corbett Vice President								
Printed Name, Title (505) 326-3325			SUPERVISOR DISTRICT 13					
Date // 4/3		ephone No.						

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.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

WEST BISTI COAL 25 WELL NO. 1 1200' FNL, 1850' FEL SECTION 25, TOWNSHIP 25 NORTH, RANGE 13 WEST LEASE NO. nm 61273 SAN JUAN COUNTY NEW MEXICO COMPLETION REPORT EXHIBIT "A"

CEMENT RECORD

Surface Casing

Mixed and pumped 60 sks. (70.8 cu.ft.) of Class "B" cement containing 2% CaCl and 1/4#/sk. cellophane flakes. Cement circulated to surface.

Production Casing -

Mixed and pumped 75 sks. (154.5 cu.ft.) Class "B" cement containing 2% Thriftyment and 1/4#/sk. cell-ophane flakes. Tailed in with 75 sks. (85.5 cu.ft.) of Class "B" cement containing 2% CaCl and 1/4#/sk. cellophane flakes. Cement circulated to surface.

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