

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Pro New Mexico, Inc. (OGRID: 018118)		Well API No. 30-045-28913
Address 141 E. Palace Ave., Santa Fe, NM 87501		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gracia Navajo 5k	Well No. 2	Pool Name, (including Formation) Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. SF-078062
Location Unit Letter K : 1845 Feet From The South Line and 1830 Feet From The West Line Section 5 Township 25N Range 11W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Water pod 3804865						
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co. 2804864	P.O. Box 1492 El Paso, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					No	

If this production is commingled with that from any other lease or pool, give commingling order number: PLC-104

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'
		X	X					
Date Spudded 12/29/92	Date Compl. Ready to Prod. 5/5/93		Total Depth 1375'		P.B.T.D. 1304'			
Elevations (DF, RKB, RT, GR, etc.) 6324' GR	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 1233'		Tubing Depth 1233'			
Perforations 1233' - 1250': 4SPF					Depth Casing Shoe 1345'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
8 3/4"	7"		139'		77 of			
6 1/4"	4 1/2"		1345'		311 of			
		2 3/8	1233					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test - MCF/D 116	Length of Test 18 3/4 hrs.	Bbls. Condensate/MCF 91 Mcf	of Condensate
Testing Method (piston, back pr.) 1 pt back pr.	Tubing Pressure (Shut-in) 120 psig	Casing Pressure (Shut-in) 120 psig	Choke Size 0.725"

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Jolene Dicks
Signature
Jolene Dicks Contract Rep.
Printed Name
Jan. 24, 1994 (505) 988-4171
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 26 1994

By ORIGINAL SIGNED BY ERNIE BUSCH

Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

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.

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