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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Replaces Old C-104 and C-110  
Effective 1-1-65

Operator Caulkins Oil Company	
Address Post Office Box 780, Farmington, New Mexico	
Reason(s) for filing (Check proper box)	
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 Ownership: <input type="checkbox"/>	Casinghead Gas: <input type="checkbox"/> Condensate: <input type="checkbox"/>

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Breach	Well No. 368	Pool Name, Including Formation Otero-Chacra	Kind of Lease State, Federal or Fee Federal	Lease No. NM03733
Location				
Unit Letter I	790	Feet From The East	Line and 1550	Feet From The South
Line of Section 23	Township 26N	Range 7W	, NMPM, Rio Arriba 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)
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)
Southern Union Gas Company	Fidelity Union Tower Bldg., 1508 Pacific, Dallas
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: \_\_\_\_\_

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 9-18-74	Date Compl. Ready to Prod. 11-5-74	Total Depth 3775	P.B.T.D. 3775					
Elevations (DF, RKB, RT, CR, etc.) 6572 DF	Name of Producing Formation Chacra	Top Oil/Gas Pay 3575	Tubing Depth 3536					
Perforations 3575-3596 and 3666-3676			Depth Casing Shoe 3775					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	140'	100					
6 3/4"	4 1/2"	3775'	255					
	1 1/4"	3536'						

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1048	Length of Test 3 Hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back pressure	Tubing Pressure (Shut-in) 982	Casing Pressure (Shut-in) PKR	Choke Size 3/4"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Charles E. DeLoach  
(Signature)  
Superintendent  
(Title)  
12-1-74  
(Date)

OIL CONSERVATION COMMISSION  
JAN 8 1974

APPROVED  
BY Original Signed by Emery C. Arnold  
SUPERVISOR DIST. #3

TITLE  
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