

OIL CONSERVATION DIVISION
P. O. BOX 7088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DATE OF FILING	5
DISTRIBUTION	
RECEIVED	1
FILE	
U.S.D.	
UNIT OFFICE	
TRANSPORTED	oil
OPERATION	gas
REGISTRATION OFFICE	2
Operator	

Caulkins Oil Company

Address

P.O. Box 780, Farmington, New Mexico

Person(s) for filing (check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:
Oil ☐
Casinghead Gas ☐

Dry Gas ☐
Condensate ☐

Other (Please explain)

Commingled Pictured Cliffs and Chacra

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Breech	Well No. 354	Pool Name, Including Formation Blanco Pictured Cliffs	Kind of Lease State, Federal or Fee	Lease No. NM-03733
Location Unit Letter <u>H</u> ; <u>790</u> Feet From The <u>East</u> Line and <u>1850</u> Feet From The <u>North</u> Line of Section <u>24</u> Township <u>26 North</u> Range <u>7 West</u> , NMPM, Rio Arriba County				

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)	
Gas Company of New Mexico	1508 Pacific Ave, Dallas, Texas	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? When	
	Yes 1974	

If this production is commingled with that from any other lease or pool, give commingling order number: R-5648

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 10-4-74	Date Compl. Ready to Prod. 9-19-79	Total Depth 3380	P.B.T.D. 3380					
Elevations (DF, RKB, RT, GR, etc.) 6156 DF	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 2336	Tubing Depth 3180					
Perforations 2380 to 2398 Pictured Cliffs			Depth Casing Shoe 3380					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	8 5/8	164	200					
6 3/4	4 1/2	3380	255					
	1 1/4	3180						

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)

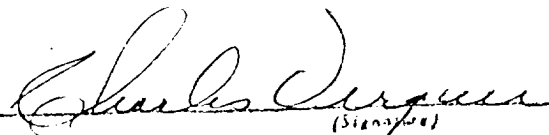
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D .74	Length of Test 24 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Gas Company of New Mexico	Tubing Pressure (Shot-in) 326	Casing Pressure (Shot-in) 326	Choke Size

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.


(Signature)
Superintendent
(Title)
12-10-79
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 10
BY _____
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 changes of condition.
Generally, Form C-104 must be filed for each pool in multiply