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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	/
OPERATOR		2
PRORATION OFFICE		

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

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

I. Operator **Caulkins Oil Company**
Address **P.O. Box 780, Farmington, New Mexico 87401**
Reason(s) for filing (Check proper box) ☒ New Well ☐ Recompletion ☐ Change in Ownership ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐ Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Breech	Well No. 332	Pool Name, Including Formation South Blanco PC	Kind of Lease State, Federal or Fee Fed.	Lease No. NM 03733
Location Unit Letter A ; 790 Feet From The North Line and 1160 Feet From The East Line of Section 23 Township 26 North Range 7 West , 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)	
Gas Company of New Mexico	1508 Pacific, Dallas, Texas	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? No When	

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'tv.	Diff. Res'tv.
		X	X					
Date Spudded 7-6-76	Date Compl. Ready to Prod. 8-14-76	Total Depth 3670	P.B.T.D. 3660					
Elevations (DF, RKB, RT, GR, etc.) 6534 GR.	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 2702	Tubing Depth 2700					
Perforations 2702-2711 and 2724-2742			Depth Casing Shoe 3660					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	138	150					
7 7/8"	4 1/2"	3660	500					
	1"	2700						

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 878	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 770	Casing Pressure (shut-in) 770	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 Deque
(Signature)
Superintendent
(Title)
9-6-76
(Date)

OIL CONSERVATION COMMISSION
APPROVED **SEP 8 1976**
BY **A.R. Kendrick**
TITLE **ASST. FC**

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 completed wells.