

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASForm C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

DISTRIBUTION	5
SANTA FE	1
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
PRORATION OFFICE	

Operator Jerome P. McHugh	
Address Box 234, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	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 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 Chris	Well No. 1	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee	Jic Apache Indian	Lease No. Cont 90
Location					
Unit Letter G	1540	Feet From The North	Line and	1610	Feet From The East
Line of Section 15	Township 27N	Range 3W	, NMPM,		Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 108, Farmington, NM 87401				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) Box 90, Farmington, NM 87401				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? 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'v.	Diff. Res'v.
		X	X					
Date Spudded 12-9-76	Date Compl. Ready to Prod. 1-9-77	Total Depth 6209'	P.B.T.D. 6150'					
Elevations (DF, RKB, RT, GR, etc.) 7015' GR - 7026' RKB	Name of Producing Formation Mesaverde	Top Oil/Gas Pay 5628'	Tubing Depth 6005'					
Perforations 5628-34', 5638-50', 5920-30', 6018-24', 6086-96', 6043', 6052', 6058'							Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET				SACKS CEMENT		
12-1/4"	8-5/8"	220' RKB				105		
7-7/8"	5-1/2"	6206' RKB				475 cu ft (1st stage)		
						906 cu ft (2nd stage)		
	2-3/8"	6005' RKB						

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Gauge 3630 after blowing 24 hours	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 1560	Casing Pressure (Shut-in) 1590	Choke Size

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.

Thomas A. Dugan
(Signature)
Engineer
(Title)
1-13-77
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Original Signed by A. R. Kendrick
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 multiple