

OIL CONSERVATION DIVISION

P.O. BOX 2008
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

REGISTRATION	
FILE	
INDEX	
LAND OFFICE	
TRANSPORTER	
OPERATION	
PRODUCTION OFFICE	

Jicarilla Energy Company ATTN: Thurman Velarde

Address P.O. Box 507 Dulce, New Mexico 87528

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of:		Effective 7/1/80
Recompletion ☐	Oil ☐	Dry Gas ☐	
Change in Ownership ☒	Casinghead Gas ☐	Condensate ☐	

If change of ownership give name and address of previous owner Palmer Oil and Gas Company Billings, Montana 59103

II. DESCRIPTION OF WELL AND LEASE

Lease Name JVA	Well No. 3	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease Jicarilla State, Federal or Fee Apache	Lease No. None
Location Unit Letter M ; 900 Feet From The South Line and 970 Feet From The West				
Line of Section 21 Township 27N Range 2W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Inland	Address (Give address to which approved copy of this form is to be sent) 5101 East Main Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Northwest Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 90 Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 21
	Twp. 27N	Rge. 2W
	Is gas actually connected? Yes	
	When 2/10/79	

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 Rest'v.	Diff. Rest'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DT, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations				Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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)

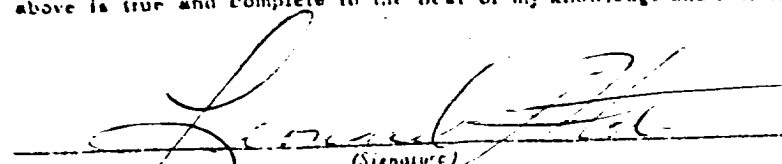
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

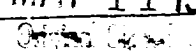
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of
Testing Method (spot, back prod.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF TRANSPORTER

I hereby certify that the information given above is true and complete to the best of my knowledge and belief.


President, Jicarilla Apache Tribe
(Title)
5-04-81
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 11 1981
BY: 
TITLE: SUPERVISOR DISTRICT 3

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 deviated 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 well name or number, or transportation or other such change of condition.
Separate Form C-104 must be filed for each pool in multiple completed wells.