

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator American Hunter Exploration, Ltd.		Well API No. 30-039-25118
Address 410 17th Street, Suite 1220, Denver, CO 80202		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> 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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

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OIL CON. DIV.  
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla 2A	Well No. #1	Pool Name, including Formation West Puerto Chiquito Mancos	Kind of Lease State, Federal or Other	Lease No. 701-90-0001
Location Surface Location: 442° FNL, 1177° FEL				
Bottom Hole Location: Unit Letter A : 620 Feet From The North Line and 3277 Feet From The East Line				
Section 2 Township 27N Range 1W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159; Bloomfield, NM 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit A Sec. 2 Twp. 27N Rge. 1W 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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 9/29/91	Date Compl. Ready to Prod. 2/02/92	Total Depth 6632' MD (4854' TVD)		P.B.T.D. 6632' MD (4854' TVD)				
Elevations (DF, RKB, RT, GR, etc.) 7236' KB 7217' G.L.	Name of Producing Formation Mancos		Top Oil/Gas Pay 4569' MD (4399' TVD) 4542' MD		Tubing Depth 5739' MD (4627' TVD)			
Performations Open hole completion with pre-perforated liner. \Liner TVD perforated from 4559' MD to 6625' MD (TD).			Depth Casing Shoe 6625' MD (4852' TVD)					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	10 3/4"		250' MD		350 sacks			
9 7/8"	7 5/8"		4569' MD		1011 Sacks 1242			
6 3/4"	5 1/2" liner		4218' MD to 6625' MD		Not cemented			
	2 7/8" tubing		5739' MD		----			

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 Tank 02/02/92	Date of Test 02/03/92	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure not available	Casing Pressure 30 psi	Choke Size not available
Actual Prod. During Test 65 bbls	Oil - Bbls 45	Water - Bbls 20	Gas - MCF 140

GAS WELL

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

VI. OPERATOR 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 James C. Lister 6/05/92  
James C. Lister Senior Geologist  
Printed Name  
5/28/92 (303) 825-5212  
Date Telephone No.

OIL CONSERVATION DIVISION

6/16-92  
Date Approved  
By Emilio X. Sanchez  
Title DEPUTY OIL & GAS INSPECTOR, DIST. 3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.