

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

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Hixon Development Company

P.O. Box 2810, Farmington, New Mexico 87401

Person(s) for filing (if check proper box)	Change in Transporter	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>		

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Chaco Wash	1	<del>NPP</del> - Pictured Cliffs <i>etc</i>	State, Federal or Fee STATE	E-3148-7
Location				
Unit Letter	O	790	Feet From The South	Line and 1850'
Line of Section	32	Township 26N	Range 12W	NMPM, San Juan 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)
El Paso Natural Gas Company	B. Reilly Heights, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.
	Is gas actually connected? When
	No Wait on p/l

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	Test Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
		X	X				X	
Date Spudded	Date Compl. Ready to Prod.	Test Depth	P.B.T.D.					
7-26-78	8-28-78	1275'	1233'					
Elevations (DF, K&B, RT, GR, etc.)	Name of Producing Formation	Test Oil Gas Pay	Tubing Depth					
6102' GL	Pictured Cliffs	1074'	1087'					
Perforations	Depth Casing Shoe							
1074' - 1086' ( 2-JSPF )	1264'							
TUBING, CASING, AND CEMENT, AS REQUIRED								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	6"	45'	4					
5	2-7/8"	1264'	125					
	1-1/4"	1087'						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total oil, gas and water and must be 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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
82	3 hours	0	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	214 psig	218 psig	0.750

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.

*Arthur H. Kendrick*  
(Signature)  
Petroleum Engineer  
(Title)  
August 29, 1978  
(Date)

OIL CONSERVATION COMMISSION

APPROVED *SEP 1 1978*, 19  
BY Original Signed by A. R. Kendrick  
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 data of condition