NO. OF COPIES RECEIVED			7	
DISTRIBUTION				
SANTA FE		7		
FILE		7		
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
	GAS	1		
OPERATOR		4		

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104

Supersed	les Oli	i C-104	and	C-110
Effective	1-1-6	5		

FILE / V	REQUEST	AND	Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS	
LAND OFFICE				
TRANSPORTER OIL				
GAS /	·		•	
OPERATOR 4	- <b>-</b>		API 30-045-23747	
Operator Operator				
DIETRICH EXPLORATION C	O., INC.			
602 Midland Savings Bl	dg., 444 17th St., Denve			
Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please explain)		
Recompletion	Oil Dry Go	zs 🔲		
Change in Ownership	Casinghead Gas Conde	nsate	-	
If change of ownership give name and address of previous owner				
. DESCRIPTION OF WELL AND	LEASE			
Lease Name	Well No. Pool Name, Including F		INOU=14-20	
DIETRICH EXPLORATION 2	8G   1 WAW PC - FRUI	TLAND State, Fede	ral or Fee FEDERAL   8376	
<b>,</b> -	850 Feet From The NORTH Lir	ne and 1850 Feet From	The EAST	
Line of Section 28 To	wnship 26N Range	12W , NMPM, SAN	JUAN County	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi	TER OF OIL AND NATURAL GA	AS Address (Give address to which appr	roved copy of this form is to be sent)	
	·		roved copy of this form is to be sent)	
Name of Authorized Transporter of Co		!		
DIETRICH GATHERING SYS	Unit Sec. Twp. P.ge.	P.O. Box 190, Farmington, NM 87401		
If well produces oil or liquids, give location of tanks.		NO		
If this production is commingled w	ith that from any other lease or pool,	give commingling order number:		
. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.	
Designate Type of Completi		X A STATE AND TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE	1 1 1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
10/18/79	12/01/79	1200	1152	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
6064 GL	Pictured Cliffs	1099	N/A Depth Casing Shoe	
Perforations			1181	
1100-1110	TUBING, CASING, AND	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
8 3/4	7	108	70	
5	2 7/8	1181	175	
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load or	il and must be equal to or exceed top allow	
OIL WELL Date First New Oil Run To Tanks	able for this de	epth or be for full 24 hours)  Producing Method (Flow, pump, gas		
Date First New Oll Hun To Tanks	Date of Test	Froducing Memor (1 100) Party, Date	(ACI)	
Length of Test	Tubing Pressure	Casing Pressure	Part	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
			JAN24 1980	
GAS WELL			OIL CON. COM.	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	cravit de Condensate	
330	3 hrs	O Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	182	3/4	
BACK PRESSURE CERTIFICATE OF COMPLIAN	N/A		ATION COMMISSION	
CERTIFICATE OF CUMPLIAN		FE		
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	1000 , 19	
Continue have been complied t	with and that the information given e best of my knowledge and belief.	BY Original Signed by FRANK 1	CHAVEZ	
		TITLE SUPERVISOR DISTRICT		
í _	,		<del></del>	
JCHN ALEXANDER (Sun		The state of the s	n compliance with RULE 1104.  owable for a newly drilled or deepened	
JCHI, ALEXANDER (Sign	ature)	I se able form muse he accord	paried by a labilation of the design.	
AGEN		leats taken on the well in acc	ordance with RULE 111.	

(Title)

January 22, 1980 (Date)

All sections of this form must be fill able 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.