

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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SANTA FE	
FILE	
U.S.O.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
ROMO Corporation

Address
P. O. Box 1785 Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Gas
☐ Condensate
 Other (Please explain)

SEP 24 1986
OIL CON. DIV.
DIST. 3

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Newsom	Well No. 4-R	Pool Name, including Formation Ballard Pictured Cliffs	Kind of Lease Federal	Lease No. SF-078433
Location Unit Letter G : 1620 Feet From The North Line and 1470 Feet From The East Line of Section 18 Township 26N Range 8W, 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"/> None	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1899 Bloomfield, New Mexico 87413
If well produces oil or liquids, give location of tanks.	Unit : G Sec. : 18 Twp. : 26 Rge. : 8W Is gas actually connected? No When

If this production is commingled with that from any other lease or pool, give commingling order number

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

FOR: ROMO CORPORATION

ORIGINAL SIGNED BY
EWELL N. WALSH

Ewell N. Walsh, PE (Signature)
Walsh Engineering & Production Corp.

(Title)

9/22/86

(Date)

OIL CONSERVATION DIVISION

APPROVED

BY

Original Signed by FRANK T. CHAVEZ

TITLE

SUPERVISOR DISTRICT 38 S

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 multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reentry	Diff. P.
			X						
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
8/27/86	9/17/86		2150'		2092'				
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
6246'KB	Pictured Cliffs		1997'		1952'				
Particulations						Depth Casing Shoe			
1956'-1964; 1966'-1972'; 1976'-1982'; 1994'-1997'						2134'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	171'	184 cu. ft.
7-7/8"	4-1/2"	2134'	609 cu. ft.
	1-1/2"	1952'	

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	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
4"THC 705; CAOF 1931	3 hr.	-0-	-0-
Testing Method (pump, back pr.)	Tubing Pressure (Shot-12)	Casing Pressure (Shot-12)	Choke Size
Back Pressure	282	282	3/4"