NO. OF COPIES REC	EIVED	i	
DISTRIBUTION			
SANTA FE		-	
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

11-24-81

(Date)

	DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C+104	
	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110	
	FILE		AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATUR	AL CAS	
	LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATUR	AL GAS	
	OIL	╡			
	IRANSPORTER GAS				
	OPERATOR	 			
					
1.	PRORATION OFFICE	1			
	Operator				
	Energy Reserves	Group, Inc.			
	Address				
	P.O. Box 3280,	Casper, Wyoming 82602			
	Reason(s) for filing (Check proper box) New Well X Change in Transporter of: Recompletion Oil Dry Gas				
	Change in Ownership	Casinghead Gas Conde			
		Constitution of the consti	mate [_]		
	If change of ownership give name				
	and address of previous owner				
	•				
II. DESCRIPTION OF WELL AND LEASE					
E. H. Pipkin 18 Fulcher Kutz Pict. Cliffs State, Federal or Fee Federal SF.				ederal or Fee Federal SF-078019	
	Location			rederal pr-07001)	
	tinit lever M . I	1020 South	. 700		
	Unit Letter ; ;	LO20 Feet From The South Lir	ne and/ 7U Feet 7	rom The West	
	10		1777	_	
	Line of Section 12 T	ownship 27N Range	11W , NMPM, Sa	n Juan County	
III.		RTER OF OIL AND NATURAL GA			
	Name of Authorized Transporter of O	il or Condensate	Address (Give address to which	approved copy of this form is to be sent)	
	1				
	Name of Authorized Transporter of C	asinghead Gas 🔃 or Dry Gas 🔀	Address (Give address to which	approved copy of this form is to be sent)	
	Southern Union Gatheri	ng Company	Fidolita Haina Taran	D.11 . W 75001	
		Unit Sec. Twp. Rge.	Fidelity Union Tower Is gas actually connected?	Dallas, Texas 75201	
	If well produces oil or liquids, give location of tanks.	1			
	Give location of lanks.		No.	W. O. Pipeline	
	If this production is commingled w	rith that from any other lease or pool,	give commingling order number	•	
١٧.	COMPLETION DATA				
	Desirente Tura et Conslet	Oil Well Gas Well	New Well Workover Deepe	n Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Complet	ion – (A)	! X !		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	9-26-81	11-3-81	1936'	1881'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
			1	1823'	
		Pictured Cliffs	<u> 1780'</u>	Depth Casing Shoe	
	Perforations 1791'-1793'; 1799'-1803';			Depin Gashiq shot	
	1807'-1809'; 1	811'-1815' w/l JSPF (16 j		!	
		TUBING, CASING, AND	CEMENTING RECORD	· ·	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	9-7/8"	7"	100'	60 sx "B" w/2% CaCl ₂ &	
				1/4# Flocele/sk	
	6-1/4"	4-1/2"	1916'	400 sx 50-50 Pozmix w/2%	
		2-3/8"	1823'	Gel, 0.5% CFR-2 & 1/4#	
	mpom pama ann processor -			d oil ari mirele equation or exceed top allow-	
V.	TEST DATA AND REQUEST I		ifter recovery of total volume of loa ipth or be for full 24 hours)	d oil and must be equal to or exceed top allow-	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	as lift sto.)	
	Date that were on war to take	Date 61 / Date	reducing waters (1 too, pamp,	PI	
		Table Breeze	16-1		
	Length of Test	Tubing Pressure	Casing Pressure '	Choke Size	
				I the Unit I had I	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MOF	
	-			MOY 30 1331	
				OIL CON. COM.	
	GAS WELL *TOOK 3 /	fice well tester thru tes	et senarator	\\ min = 1	
1	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
İ	103	24 hrs.	0	N/A	
	Testing Method (pitot, back pr.)	Tubing Pressure:	Casing Pressure (Shut-in)	Choke Size	
ı	*See above note	70 psi	160 psi	3/8"	
ļ		<u> </u>			
VI.	CERTIFICATE OF COMPLIAN	NCE		RVATION COMMISSION	
			APPROVED NOV 3 0 1981		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given					
		Original Signed by FRANK T. CHAVEZ			
	above is true and complete to the best of my knowledge and belief.		BY		
			SUPERVISOR DISTI	RICT 纽 3	
			TITLE		
	2	1 0	This form is to be filed	in compliance with RULE 1104.	
		oth Koss	If this is a request for	allowable for a newly drilled or deepened	
•	(Sign	nature)	well, this form must be acco	ompanied by a tabulation of the deviation	
	District Clerk		tests taken on the well in		
		itle)	All sections of this for able on new and recomplete	m must be filled out completely for allow-	
	(1	****/	ii able on new and recomplete	d matte.	

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.