

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator BRECK OPERATING CORPORATION		Well API No. 30-045-07341
Address c/o Walsh Engr. & Prod. Corp. 204 N. Auburn Farmington, New Mexico 87401		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" 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		

RECEIVED
JUN 22 1993
OIL CON. DIV.
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kutz Government	Well No. 9	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, <u>Federal</u> or Fee	Lease No. SF-047039A
Location Unit Letter E : 1650 Feet From The North Line and 990 Feet From The West Line Section 20 Township 28N Range 10W , NMPM, 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)					
Sunterra Gas Gathering Company	P.O. Box 26400 Albuquerque, N.M. 87125					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					Yes	

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	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X				X		
Date Spudded 8/12/53	Date Compl. Ready to Prod. 6/13/93		Total Depth 2136'			P.B.T.D. -1960'		
Elevations (DF, RKB, RT, GR, etc.) 5973 GR	Name of Producing Formation Basin Fruitland Coal		Top Oil/Gas Pay 1844'			Tubing Depth 2004'		
Perforations 1844-1856'; 1914-1917'; 1921-1924'; 1974-1992'						Depth Casing Shoe 2036		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
13-3/8"	10-3/4"		94'			100 sacks		
8-3/4"	7"		2036'			100 sacks		
	1-1/2"		2004					

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	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 N/A Capable of producing commercial quantities of Gas	Length of Test	Bbls. Condensate/MNCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 225	Casing Pressure (Shut-in) 225	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.

FOR: **BRECK OPERATING CORPORATION**

Paul C. Thompson

Signature **Paul C. Thompson, P.E.** Agent

Printed Name **6/18/93** Title **505 327-4892**

Date **6/18/93** Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JUN 18 1993**

By **Original Signed by CHARLES GHOLSON**

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.