

| | |
|---------------------|-----|
| COPIES RECEIVED | |
| DISTRIBUTION | |
| STATE | |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| REGISTRATION OFFICE | |

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

Flag-Redfern Oil Co.

Address
P O Box 208, Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Completion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Aloha Well No. #1 Pool Name, including Formation Fulcher Kutz P.C. Pinon Fruitland

Location
Unit Letter L 1710' Feet From The South Line and
Line of Section 16 Township 28N Range 11W

SIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co. P O Box 990, Farmington, NM 87401

well produces oil or liquids, location of tanks. Unit L Sec. 16 Twp. 28N Rge. 11W Is gas actually connected? When

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

COMPLETION DATA

Designate Type of Completion - (X) Oil Well Gas Well New Well (X)

Date Spudded 1-6-80 Date Compl. Ready to Prod. 11-25-80 Total

Elevations (DF, RKB, RT, GR, etc.) 6641' GL Name of Producing Formation P.C. & Fruitland Top

Perforations 1597-1602 and 1311-1326

TUBING, CASING, AND CEMENT

| HOLE SIZE | CASING & TUBING SIZE |
|-----------|----------------------|
| 3-3/4" | 7" |
| 5" | 2-7/8" |
| | 1-1/4" |

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after 24 hours for this depth)

| Date First New Oil Run To Tanks | Date of Test |
|---------------------------------|-----------------|
| Length of Test | Tubing Pressure |
| Actual Prod. During Test | Oil - Bbls. |

AS WELL
Shut-in Prod. Test - MCF/D 329 CAOF PC Length of Test 3 hrs PC
2255 CAOF Fr 3 hrs Fr
Testing Method (pitot, back pr.) Tubing Pressure (shut-in) 482 psi PC
One-point back pressure 482 psi Fr

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.

Thomas A. Dugan
(Signature)
Agent
(Title)
12-30-80

OWABLE

OIL AND NATURAL GAS

Other (Please explain)

Kind of Lease Federal Lease No. NM 01336
State, Federal or Fee

790' Feet From The West
NMPM, San Juan County

(Give address to which approved copy of this form is to be sent)

(Give address to which approved copy of this form is to be sent)

Box 990, Farmington, NM 87401

actually connected? When

commingling order number:

| Well | Workover | Deepen | Plug Back | Same Res. | Diff. Res. |
|---------------|----------|--------|--------------------|-----------|------------|
| Depth 690' | | | P.B.T.D. 1657' | | |
| Oil/Gas Pay 1 | | | Tubing Depth 1594' | | |
| | | | Depth Casing Shoe | | |

TESTING RECORD

| DEPTH SET | SACKS CEMENT |
|-----------|-----------------------|
| 25' GL | 60 sx class "B" |
| 92' GL | 75 sx extended slurry |
| | 75 sx class "B" ne |
| 94' | |

every of total volume of load oil and must be equal to or exceed top oil be for full 24 hours)

Testing Method (Flow, pump, gas lift, etc.)

Pressure Choke Size
r-Bbls.

Condensate/MMCF

ing Pressure (shut-in) 75 psi PC
73 psi Fr Choke Size 1/2" PC
3/4" Fr

OIL CONSERVATION COMMISSION

APPROVED MAR 3 1981

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of con
C-104 must be filed for each pool in m