

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form No. 1
Revised 1-64
Oil Conservation Commission

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I.

Operator Hicks Oil & Gas, Inc.	
Address P.O. Drawer 3307 - Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	
New Well ☐	Change in Transporter of: Oil ☒ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐
Recompletion ☐	Effective Date July 1st, 1985
Change in Ownership ☐	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Southeast Cha Cha Unit	Well No., Pool Name, including Formation 15 Cha Cha Gallup	Kind of Lease State, Federal or Fee Federal SF 077976
Location Unit Letter F 1980' Feet From The North Line and 1980' Feet From The West		
Line of Section 17 Township 28N Range 13W, NMPM, San Juan		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Mincos Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1320 - Farmington, New Mexico 87499
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? Area

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	Other (Specify)
Date Spudded	Date Compl. Ready to Prod.	Total Depth	Perforations	Depth of First Perforation	Depth of Last Perforation		
Elevations (D.F., R.A.S., R.T., G.R., etc.)	Name of Producing Formation	Top Oil/Gas Pay	Bottom of Gas Pay	Bottom of Oil Pay	Bottom of Water Pay		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Test must be after recovery of total volume of produced oil and gas, and must be in accordance with Rule 11.1, N.M.C.C. for this period or be for full 24 hours.

Test Period (See Instructions To Tanks)	Date of Test	Producing Method (Flow, pumpjack, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
GAS WELL		
Test Period (See Instructions To Tanks)	Date of Test	Producing Method (Flow, pumpjack, etc.)
Length of Test	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)

VI. 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.

Hicks Oil & Gas, Inc.

President

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 11.1. If this is a request for a well which is newly drilled or deepened well, this form must be accompanied by a tabulation of the test results taken on the well in accordance with RULE 11.1. 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. If transporter change, Form 11.1A must be filed with this form. Separate Form 11.1A must be filed for each well which is recompleted well.