

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

DISTRIBUTION			
ANTA FE		1	
ILE		1	✓
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		1	
PRORATION OFFICE			

1. Operator

Coastline Petroleum Company, Inc.

%John E. Schalk

P. O. Box 2078, Farmington, New Mexico

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☒

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☒Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner

LONE STAR INDUSTRIES, INC., P. O. BOX 2078, FARMINGTON, NEW MEXICO

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Schalk 52	Well No.	5	Pool Name, including Formation	Blanco Mesa Verde	Kind of Lease	State, Federal or Fee	Fed NM	Lease No.	4452
Location										
Unit Letter	M	790	Feet From The	S	Line and	790	Feet From The	W		
Line of Section	24	Township	29 N	Range	5 W	, NMPM,		Rio Arriba	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)					
Northwest Pipeline Corp	P.O. Box 1526 Salt Lake City, Utah					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					No	

If this production is commingled with that from any other lease or pool, give commingling order number: Does Not Apply

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	Date Compl. Ready to Prod.		Total Depth	P.B.T.D.				
2-27-74	3-9-74		5823					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top of Gas Pay	Tubing Depth				
6537 KB	Mesa Verde		5350	5676				
Perforations				Depth Casing Shoe				
5562-5706, 5354-5432				5822				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4	8-5/8		178		150			
7-7/8	3-1/2		5822		275			

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 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/MMCF	Gravity of Condensate
6252 AOF	4		
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Well tester	1157	1161	3/16, 7/32, 1/4, 5/16

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.

JOHN E. SCHALK, AGENT

OCTOBER 4, 1974

OIL CONSERVATION COMMISSION

APPROVED

By Original Signed: [Signature]

TITLE

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 multiple