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| FILE                   |     |
| U.S.G.S.               |     |
| LAND OFFICE            |     |
| TRANSPORTER            | OIL |
|                        | GAS |
| OPERATOR               |     |
| PRODUCTION 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-105  
Effective 1-1-85

RECEIVED

OCT 19 1983

OIL CON. DIV.  
DIST. 3

Operator  
M.R. SCHALK  
Address  
P O BOX 25825 ALBUQUERQUE NM 87125

Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

|                                                                                                                                                            |                |                                                                         |                                                   |                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------------|---------------------------------------------------|-----------------------|
| Lease Name<br>SCHALK 29-4                                                                                                                                  | Well No.<br>10 | Pool Name, including Formation<br><del>CHAZA MESA</del> PICTURED CLIFFS | Kind of Lease<br>State, Federal or Fee<br>FEDERAL | Lease No.<br>NM 18322 |
| Location<br>Unit Letter M ; 950 Feet From The SOUTH Line and 800 Feet From The WEST<br>Line of Section 23 Township 29N Range 4W , NMPLA, RIO ARRIBA County |                |                                                                         |                                                   |                       |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                                                |                                                                                                                    |            |             |            |                                   |                  |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|------------|-------------|------------|-----------------------------------|------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/><br>PLATEAU INC.               | Address (Give address to which approved copy of this form is to be sent)<br>P O BOX 26251 / ALBUQUERQUE NM 87125   |            |             |            |                                   |                  |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/><br>NORTHWEST PIPELINE | Address (Give address to which approved copy of this form is to be sent)<br>P O BOX 1526 / SALT LAKE CITY UT 84110 |            |             |            |                                   |                  |
| If well produces oil or liquids,<br>give location of tanks.                                                                                    | Unit<br>M                                                                                                          | Sec.<br>23 | Twp.<br>29N | Rge.<br>4W | Is gas actually connected?<br>yes | When<br>10/13/83 |

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

V. COMPLETION DATA

|                                                |                                                |          |                          |          |                            |           |             |              |
|------------------------------------------------|------------------------------------------------|----------|--------------------------|----------|----------------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X)             | Oil Well                                       | Gas Well | New Well                 | Workover | Deepen                     | Plug Back | Same Res't. | Diff. Res't. |
|                                                |                                                | X        | X                        |          |                            |           |             |              |
| Date Spudded<br>2/10/82                        | Date Compl. Ready to Prod.<br>10/29/82         |          | Total Depth<br>6592'     |          | P.B.T.D.<br>6010'          |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.)<br>7322' GR | Name of Producing Formation<br>PICTURED CLIFFS |          | Top Oil/Gas Pay<br>4043' |          | Tubing Depth<br>4114'      |           |             |              |
| Perforations<br>4043' - 4227' 15-32 HOLES      |                                                |          |                          |          | Depth Casing Shoe<br>6592' |           |             |              |
| TUBING, CASING, AND CEMENTING RECORD           |                                                |          |                          |          |                            |           |             |              |
| HOLE SIZE                                      | CASING & TUBING SIZE                           |          | DEPTH SET                |          | SACKS CEMENT               |           |             |              |
| 12 1/2"                                        | 8 5/8" CASING                                  |          | 307'                     |          | 210 SKS                    |           |             |              |
| 7 7/8"                                         | 4 1/2" CASING                                  |          | 6592'                    |          | 550, 570 SKS               |           |             |              |
|                                                | 2.375" TUBING                                  |          | 4114'                    |          |                            |           |             |              |

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<br>812 ACF              | Length of Test<br>3 hrs.          | Bbls. Condensate/MCF<br>0         | Gravity of Condensate<br>N/A |
| Testing Method (pilot, back pr.)<br>Well Tester | Tubing Pressure (Shot-in)<br>1090 | Casing Pressure (Shot-in)<br>1090 | Choke Size<br>3/4"           |

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.

OIL CONSERVATION COMMISSION

OCT 19 1983

APPROVED  
BY Original Signed by FRANK T. CHAVEZ

TITLE 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 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 all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multi-

Chandia Short  
(Signature)

Agent  
(Title)

10/18/83  
(Date)