

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

OIL CONSERVATION DIVISION

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 Falcon Seaboard Oil Company		Well API No. 3003925068
Address Five Post Oak Park, Suite 1400, Houston, Texas 77027		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name 29-4 Carson 3	Well No. 1	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease State Federal or State	Lease No. SF 079756-A
Location Unit Letter <u>D</u> : <u>989</u> Feet From The <u>North</u> Line and <u>1087</u> Feet From The <u>West</u> Line Section <u>3</u> Township <u>29N</u> Range <u>4W</u> , <u>NMPM</u> , <u>Rio Arriba</u> 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"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) 295 Chipeta Way, Salt Lake City UT 84158					
If well produces oil or liquids, give location of tanks.	Unit <u>D</u>	Sec. <u>3</u>	Twp. <u>29N</u>	Rge. <u>4W</u>	Is gas actually connected? yes	When? <u>11-18-92</u>

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
		<u>X</u>	<u>X</u>					
Date Spudded <u>9-18-91</u>	Date Compl. Ready to Prod. <u>11-18-92</u>		Total Depth <u>4207'</u>		P.B.T.D. <u>4206'</u>			
Elevations (D.F., RKB, RT, GR, etc.) <u>7546</u> <u>7559'</u> RKB	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay <u>4130'</u>		Tubing Depth <u>4154'</u>			
Perforations <u>4130-4132', 4138-4144', 4162-4176' and 4190-4202'</u>					Depth Casing Shoe <u>4207'</u>			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12-1/4"</u>	<u>9-5/8"</u>	<u>275' KB</u>	<u>175 sx</u>
<u>8-3/4"</u>	<u>7"</u>	<u>4075' KB</u>	<u>661 sx (see attached)</u>
<u>11" (cavitated)</u>	<u>5-1/2" liner</u>	<u>TOL @ 3944', BOL @ 4207'</u>	<u>Uncemented</u>
<u>5-1/2"</u>	<u>2-3/8" tubing</u>	<u>4154' KB</u>	<u>Open ended</u>

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.)	RECEIVED JAN 9 1993 OIL CON. DIV. DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

GAS WELL

Actual Prod. Test - MCF/D <u>148</u>	Length of Test <u>72 hours</u>	Bbls. Condensate/MNCF <u>trace</u>	Gravity of Condensate <u>not measured</u>
Testing Method (pilot, back pr.) <u>Back pressure</u>	Tubing Pressure (Shut-in) <u>1000 psig (94 hrs)</u>	Casing Pressure (Shut-in) <u>1000 psig (94 hrs)</u>	Choke Size <u>12/64"</u>

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.

Signature James D. Wilson Manager, Production
Printed Name James D. Wilson Title (713) 622-0055
Date 1-7-93 Telephone No. (713) 622-0055

OIL CONSERVATION DIVISION

Date Approved JAN 29 1993

By Barry J. Chang
Title SUPERVISOR DISTRICT #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