

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

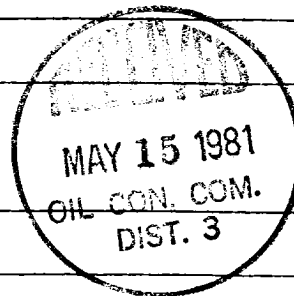
Form C-104
Revised 10-1-70

B.K.

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OF APPLICANT	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
FORMATION OFFICE	

Operator S & I OIL COMPANY	
Address 413 W. Main Street Farmington, N.M. 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>



If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Neilson	Well No. 1	Pool Name, including Formation Meadows Gallup Est.	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter <u>P</u> ; <u>240</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u> Line of Section <u>3</u> Township <u>29N</u> Range <u>15W</u> , NMPM, San Juan County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, N.M.	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> NONE	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 P	Sec. 3
	Twp. 29N	Rge. 15W
	Is gas actually connected? NO	
	When	

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Rest'y.	Diff. Rest'y.
Date Spudded 1/28/81	Date Compl. Ready to Prod. 2/20/81		Total Depth 4556'		P.B.T.D. 4531'			
Elevations (DF, RKB, RT, GR, etc.) 5144' GR	Name of Producing Formation Meadows Gallup		Top Oil/Gas Pay 4338'		Tubing Depth 4298'			
Perforations 4210'-15'; 4218'-22'; 4226'-32'; 4236'-46'; 4255'-62'; 4266'-68'; 4278'-82'; 4292'-95'; 4297'-99'; 4301'-12'; 4316'-18'; 4336'-38'					Depth Casing Shoe 4308'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		297'		275 sacks			
7-7/8"	4-1/2"		4532'		850 sacks			
	2-3/8"		4308'					

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 3/19/81	Date of Test 4/25/81	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 120 psig	Casing Pressure 600 psig	Choke Size 1/4"
Actual Prod. During Test	Oil-Bbls. 37	Water-Bbls. -0-	Gas-MCF 24

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. 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.

FOR: S & I OIL COMPANY

ORIGINAL SIGNED BY
EWELL N. WALSH

Ewell N. Walsh, PE(Signature) President
Walsh Engineering & Production Corp.

5/14/81

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED 5/15/81, 19

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 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 Form C-104 must be filed for each pool in multiply completed wells.