

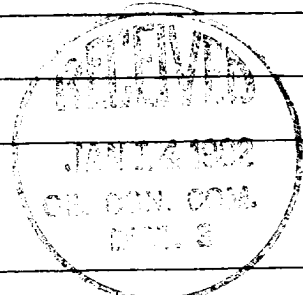
OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

LP



COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.D.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
PRODUCTION OFFICE	

Operator Jerome P. McHugh	
Address P O Box 208, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name John A. Brimhall	Well No. 1	Pool Name, including Formation Meadows Gallup	Kind of Lease State, Federal or Fee	Fee	Lease No. ---
Location Unit Letter <u>A</u> ; <u>860</u> Feet From The <u>North</u> Line and <u>380</u> Feet From The <u>East</u> Line of Section <u>10</u> Township <u>29N</u> Range <u>15W</u> , NMPM, <u>San Juan</u> 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, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 256, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 A	Sec. 10
	Twp. 29N	Rge. 15W
	Is gas actually connected? <u>No</u> 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 Res'v.	Diff. Res'v.
Date Spudded 11-30-81	Date Compl. Ready to Prod. 1-9-82	Total Depth 4488'	P.B.T.D. 4427'					
Elevations (DT, RT, GR, etc.) 5130'	Name of Producing Formation Gallup	Top Oil/Gas Pay 4000'	Tubing Depth 4379' RKB					
Perforations 4000-4398', 35 holes			Depth Casing Shoe 4483'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	172' RKB	175					
7-7/8"	4-1/2"	4483' RKB	350 cu.ft. 1st stage					
			752 cu.ft. 2nd stage					
	2-3/8"	4379' RKB						

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL		Producing Method (Flow, pump, gas lift, etc.) swabbing	
Date First New Oil Run To Tanks 1-5-82	Date of Test 1-11-82	Casing Pressure 620 psi SI	Choke Size ---
Length of Test 8 hrs.	Tubing Pressure 85 psi SI	Water-Bbls. 16 bbls. water	Gas-MCF not measured
Actual Prod. During Test	Oil-Bbls. 25 bbls.		

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

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.

Thomas A. Dugan
(Signature)
Petroleum Engineer
(Title)
1-11-82
(Date)

OIL CONSERVATION DIVISION
JAN 14 1982
APPROVED _____, 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 Forms C-104 must be filed for each pool in multiply completed wells.