Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.		OTHAI	121	OHI OIL	AND NA	UNALGA		OBINA .			
Operator BHP PETROLEUM (AMERICAS) INC.							- 1	Well API No. 30-045-26365			
Address P.O. BOX 977 FAR	199		1 30	<u> </u>							
Reason(s) for Filing (Check proper box)					X Outre	e (Please expla	in)	<u> </u>			
New Well		Change in	Transp	orter of:	, ,	E POOL I	O WEST	KUTZ			
Recompletion	Oil		Dry G	🗆		TLAND SAN					
Change is Operator	Casinghead	GM 🔲	Conde	2 344 C							
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL			D I A				10:24			use No.	
		Well No. 356			or FRUITLAN	ID SAND		Kind of Lease State, Federal or <u>Fee</u>		PEE	
Location G 1520 Unit Letter : :		0	Feet F	NO 	ORTH	and	460 F	EAST Liss			
Section 19 Townshi	p 29	N	Range	12W	. 10	APM, SAN	JUAN		·······	County	
III. DESIGNATION OF TRAN	SPORTE	R OF OI	L AN	ND NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Conden	iate.		Address (Give address to which approved			copy of this form is to be sent)			
Name of Authorized Transporter of Casin	Cu 🔀	Address (Give address to which approved copy of this form is to be sent)									
BHP PETROLUEM (AMERIC	AS) INC				P.O. BO	X 977 I	'ARMING'	TON, NM 87499			
If well produces oil or liquids, give location of tanks.	Unit Sec.		Twp. Rge.		is gas actually connected? YES		When	When ? 1986			
If this production is commingled with that	from any out	er lease or p	pooi, g	ive comming	ing order numi	per:					
IV. COMPLETION DATA		Oil Well	_	Cas Well	New Wall	Workover	Deepes	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		1			<u> </u>	<u> </u>	1	1	1		
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations					Depth Caun				ng Shoe		
	Ţ	UBING.	CAS	ING AND	CEMENTI	NG RECOR	D				
HOLE SIZE						DEPTH SET		SACKS CEMENT			
					1			1		···	
					!						
V. TEST DATA AND REQUE											
OIL WELL Test must be after to Date First New Oil Rus To Teak	Days of Te		of loss	ou and mus			owable for th	is depth or be	for full 24 hou	VS.)	
	Date of 14E				Producing Method OF G			IVED			
Length of Test	Tubing Pre	Tubing Pressure			Caring Pressure			Chow s			
Actual Prod. During Test	Oil • Bbia.				Water - Bola	Oll	James 1	SA-MCF	TAL MCF		
GAS WELL				. —	*************************************		20 00 00 00 00 00 00 00 00 00 00 00 00 0	WV.			
Actual Prod. Test - MCF/D	Leaguh of	Test			Bbis. Conde	MMCF			Condensate		
l'esung Method (puor. back pr.)	Tubing Pressure (Shul in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIC	ATE OF		1 10	NCE	1		· · - · - · · · · · · · · ·		······································		
				11CE		OIL CON	NSERV	'ATION	DIVISIO	NC	
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.					Date ApprovedJAN 2 11993						
Jaco Lanery											
FRED LOWERY OPERATIONS SUPERINTENDENT					By_	SUPERVISOR DISTRICT #3					
01-19-94 (505) 327-1639 Title					Title) 	SUPERI	MOOR DIS	SIRICT	3	
Dute		Tele	e phone	No.							

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 accordant 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 1, 11, 111, 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.