

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator DenverAmerican Petroleum Limited Partnership 26679		Well APN No. 30-045-26529
Address 410 17th Street, Suite 1600, Denver, CO 80202		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change in Transporter of: ☒ Dry Gas ☐	
Recompletion ☐	Changehead Gas ☐ Condensate ☐	
Change in Operator ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name State Gas Com BQ 14403	Well No. 2	Pool Name, including Formation Basin Dakota 71599	Kind of Lease State, Federal or Fee	Lease No. 4156
Location Unit Letter K, 1470 Feet From The S Line and 1470 Feet From The W Line Section 32 Township 29N Range 13W, N.M., San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Gary Williams Energy Corp.	Address (Give address to which approved copy of this form is to be sent) 370 17th Street, Suite 5300, Denver, CO 80202
Name of Authorized Transporter of Changehead Gas or Dry Gas El Paso Nat'l Gas	Address (Give address to which approved copy of this form is to be sent) 304 Texas St. P.O. Box 1492, El Paso, TX 79978
If well produces oil or liquids, give location of tanks.	Unit K, Sec. 32, Twp. 29, Rge. 13 Is gas actually connected? Y When? 4/86

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	Saddle Riv	Drift Riv
Date Spudded	Date Complet. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Performance					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 2% of total)			
Date First New Oil Run To Tank	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

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GAS WELL

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

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
John L. Schmidt, Pres. Denap, Inc. G.
Date 11/4/93 (303) 534-2331
Title Supervisor

OIL CONSERVATION DIVISION

NOV 18 1993

Date Approved

By

Title

SUPERVISOR DISTRICT 13

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.