

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 BHP PETROLEUM (AMERICAS) INC.		Well API No. 30-045-28069
Address P.O. BOX 977 FARMINGTON, NM 87499		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/> Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Other (Please explain)		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name GALLEGOS CANYON UNIT 2038	Well No. 514	Pool Name, Including Formation W. KUTZ PICTURE CLIFF	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter 0 : 880 Feet From The SOUTH Line and 2415 Feet From The EAST Line Section 34 Township 29N Range 12W , NMPM, SAN JUAN County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil BHP PETROLEUM (AMERICAS) INC. 571250	or Condensate <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 977 FARMINGTON, NM 87499
Name of Authorized Transporter of Casinghead Gas BHP PETROLEUM (AMERICAS) INC. 571230	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 977 FARMINGTON, NM 87499
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? When?
		NO

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
		X	X					
Date Spudded 10-12-90	Date Compl. Ready to Prod. 12-07-90	Total Depth 1500'	P.B.T.D. 1446'					
Elevations (D.F., RKB, RI, GR, etc.) 5426' GR	Name of Producing Formation PICTURE CLIFF	Top Oil/Gas Pay 1352'	Tubing Depth 1397'					
Perforations 1352' - 1364' 4 JSPF			Depth Casing Shoe 1483'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 8-3/4" 6-1/4"	CASING & TUBING SIZE 7" 23# 4-1/2" 10.5# 2-3/8" 4.7#		DEPTH SET 135' 1483'		SACKS CEMENT 125 sk CL. "B" + ADD. 200 sk 50/50 POZ & 25 sk CL. "B" + ADD.			

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 before full 24 hours)		
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
GAS WELL		
Actual Prod. Test - MMCF/D 91	Length of Test 24	Bbls. Condensate/MMCF
Testing Method (pilot, back pr.) BACK PRESS.	Tubing Pressure (Shut-in) 239	Gravity of Condensate
		Casing Pressure (Shut-in) 130
		Choke Size 3/8"

RECEIVED
APR 14 1992
OIL CON. DIV.
DIST. 3

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 FRED LOWERY
Printed Name FRED LOWERY Title OPERATIONS SUPT.
Date 04-13-92 Telephone No. (505) 327-1639

OIL CONSERVATION DIVISION

APR 14 1992

Date Approved

By

Brian J. Chang
SUPERVISOR DISTRICT 13

Title

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.

100-443887-100