

OIL CONSERVATION DIVISION

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

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. 30-045-28331
Address P.O. BOX 977 FARMINGTON, NM 87499		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> 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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name GALLEGOS CANYON UNIT	Well No. 507	Pool Name, including Formation W. KUTZ PICTURED CLIFF	Kind of Lease State, Federal or Fee	Lease No. SF 080723
Location Unit Letter D : 840 Feet From The NORTH Line and 815 Feet From The WEST Line Section 20 Township 29N Range 12W , NMPM , SAN JUAN County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
BHP PETROLEUM (AMERICAS) INC.	P.O. BOX 977 FARMINGTON, NM
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 10-22-90	Date Compl. Ready to Prod. 11-20-90	Total Depth 1508'	P.B.T.D. 1473'					
Elevations (DF, RKB, RT, GR, etc.) 5443' GR	Name of Producing Formation ICTURED CLIFF	Top Oil/Gas Pay 1368' 1372'	Tubing Depth 1428'					
Perforations 1368'-80' @ 4 JSPF (48 holes @ .35 dia.)	1372' 1374'		Depth Casing Shoe 1494'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
8 3/4"	7" 23#	134'	100 sk cl "B" + addit.					
6 1/4"	4 1/2" 10.5#	1494'	130 sk cl "B" 50/50 poz					
	2 3/8" 4.7#	1428'	95 sk cl "B" + addit.					

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
		OCT 16 1991
Length of Test	Tubing Pressure	Casing Pressure
		OIL CON. DIV.
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
		DIST. 3

GAS WELL

Actual Prod. Test - MCF/D 347	Length of Test 24 hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate N/A
Testing Method (pilot, back pr.) BACK PRESS.	Tubing Pressure (Shut-in) 189	Casing Pressure (Shut-in) 233	Choke Size 3/8"

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** OPERATIONS SUPT.
Printed Name **FRED LOWERY** Title
Date **OCT. 11, 1991** Telephone No. **327-1639**

OIL CONSERVATION DIVISION

Date Approved **OCT 16 1991**

By **327-1639**
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.