

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer 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 INCLINE RESERVES, INC.		Well API No. 30-045-28875
Address 1603 SW 37th St., Topeka KS 66611-2563 913-267-5033		
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 checked="" 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 State Com 32	Well No. #1	Pool Name, including Formations BASIN FRUITLAND COAL	Kind of Lease <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal or Free	Lease No. E-1451-5
Location Unit Letter K : 1605 Feet From The South Line and 1730 Feet From The West Line Section 32 Township 29N Range 9W 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)					
EL PASO NATURAL GAS	P O BOX 4990 FARMINGTON NM 87499-4990					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Trp.	Rge.	Is gas actually connected?	When?
					no	May 1, 1993

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 12/18/92	Date Compl. Ready to Prod. 03/10/93		Total Depth 2282'		P.B.T.D. 2280'			
Elevations (DF, RKB, RT, GR, etc.) 5887' GR	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 1999'		Tubing Depth 2210'			
Formations 1999-2001', 2008-12', 2019-22', 2061-67' 2069-75' 2106-11', 2113-16', 2182-84', 2186-88'					Depth Casing Shoe 2280'			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	250'	225 sx reg
7-7/8"	4-1/2"	2280'	350 sx Poz, 175 sx reg.
	1,900"	2210'	

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 before full production is achieved)		Producing Method (Flow, pump, gas lift, etc.)	
Date First New Oil Rse To Tank	Date of Test		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
		MAR 15 1993 OIL CON. DIV. DIST. 3	

GAS WELL

Actual Prod. Test - MCF/D 1.052	Length of Test 24 hrs	Bbls. Condensate/MCMCF	Gravity of Condensate
Testing Method (pacer, back pr.) back pressure	Tubing Pressure (Shut-in) 276#	Casing Pressure (Shut-in) 276#	Choke Size 1-1/4"

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 P. Garrett Vice President
Printed Name J. P. Garrett Title
Date 03/12/93 Telephone No. 913-267-5033

OIL CONSERVATION DIVISION

Date Approved MAR 25 1993

By [Signature]
Title SUPERVISOR DISTRICT #3

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.