

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**

I.

| | |
|---|---|
| Operator Evergreen Operating Corporation | Well API No. 30-039- 25079 |
| Address c/o A. R. Kendrick, Box 516, Aztec NM 87410 | |
| 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 Rosa Unit | Well No. 287 | Pool Name, Including Formation Basin Fruitland Coal | Kind of Lease XXX Federal XXX | Lease No. SF-078890 |
| Location Unit Letter <u>B</u> : <u>900</u> Feet From The <u>North</u> Line and <u>2100</u> Feet From The <u>East</u> Line Section <u>4</u> Township <u>31 N</u> Range <u>4 W</u> , NMPM, <u>Rio Arriba</u> 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) | | | |
| <u>Water Prod # 2806640</u> | | | | |
| 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) | | | |
| <u>Associated Natural Gas Incorporated 2806634</u> | <u>Box 5493, Denver, CO 80217, Attn: Mr. Knipp</u> | | | |
| 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 10-4-92 | Date Compl. Ready to Prod. 6-29-93 | | Total Depth 4135 | | P.B.T.D. 4091 | | | |
| Elevations (DF, RKB, RT, GR, etc.) 7160 GR | Name of Producing Formation Fruitland Coal | | Top Oil/Gas Pay 3950 | | Tubing Depth none 3988 | | | |
| Perforations 3950-62, 4009-16, 4022-27 | | | | | Depth Casing Shoe 4137 | | | |

TUBING, CASING AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|--------------------|
| 12-1/4 | 8-5/8 | 375 | 266 CuFt |
| 7-7/8 | 5-1/2 | 4137 | 1372 CuFt 2 stages |
| | 2 7/8 | 3988 | |

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.) | RECEIVED JUL 6 1993 OIL CON. DIV.! |
| Length of Test | Tubing Pressure | Casing Pressure | |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | |

GAS WELL

| | | | |
|--|---|-----------------------------------|-----------------------|
| Actual Prod. Test - MCF/D 6-29-93 | Length of Test | Bbls. Condensate/MMCF TSTM | Gravity of Condensate |
| Testing Method (pilot, back pr.) Back Prsuure | Tubing Pressure (Shut-in) logged off 950 | Casing Pressure (Shut-in) 1030 | 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.

A. R. Kendrick
 Signature **A. R. Kendrick** Agent
 Printed Name _____ Title _____
 Date **JUL 6 1993** Telephone No. **(505) 334-2555**

OIL CONSERVATION DIVISION

Date Approved **SEP 03 1993**

By Original Signed by CHARLES GHOLSON

Title DEPUTY OIL & GAS INSPECTOR, DIST. 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.