OIL CONSERVATION DIVISION

P. O. HOX 2088

SANTA FE, NEW MEXICO 87501

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LAND DEFILE	.
THANSPORTER DIL.	1.4-
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OPPRATUR	-1/
PROBATION OFFICE	_1

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-	LAND DEFER	neouett (OD	ALLOWARIE 3	0-005-23519			
	IMAMIFURIER OIL	REQUEST FOR ALLOWABLE AND					
	1000	5					
1.	PROBATION OFFICE						
	Union Texas Petroleu	Union Texas Petroleum					
	Addiess	Suite 1010, Denver, Col	orado 80295				
	1860 Lincoln Street, Suite 1010, Denver, Colorado 80295						
	Reason(s) for filing (Check proper box)	Change in Transporter of:					
- 1	Recompletion	OII Dry Gai	· 🔲				
	Change in Ownership	Casinghead Gas Conden	sate				
	If change of ownership give name						
	and address of previous owner						
u.	DESCRIPTION OF WELL AND I	EASE. Well No. Pool Name, Including Fo	ormation Kind of I	1			
	Johnston-Federal	11-Y Wildcat - Frui		sderol or Fee Federal SF078439			
	Location						
	Unii Letter N : 990	Feet From The South Line	e and Feet F	rom The West			
	Line of Section 7 Tow	mahip 31 North Range 9	West , NMPM,	San Juan County			
		The same of the sa	c				
n.	DESIGNATION OF TRANSPORT	or Condensate		approved copy of this form is to be sent)			
	Plateau, Inc.		1921 Bloomfield Blv	d., Farmington, New Mexico			
	Name of Authorized Transporter of Cas	inghead Gas 🔲 💮 or Dry Gas 🔀	Address (Give address to which to	ington, New Mexico 87401			
	El Paso Natural Gas		Is gas octually connected?	When			
	If well produces oil or liquids, give location of tanks.	N 7 31N 9W	No				
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number				
ľ¥.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepe	The state of the s			
	Designate Type of Completion		X				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 3650 KB	P.B.T.D. 3644 KB			
	7/23/79	12/4/79 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
•	Elevations (DF, RKB, RT, GR, etc.) 6612 GL	· Fruitland	3275	3420			
	Perforations 2046 52	3356-60, 3372-78, 3383-90). 3404-12 w/41 jet sh	Depth Casing Shoe 3654			
	3334-38, 3346-52,						
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	HOLE SIZE	9-5/8"	334	200 sx			
	12-1/4'' 7-7/8''	5-1/2"	3654	1200 sx			
	7-178	2-3/8"	3420				
				i i i i a sa la savel sa as excessi san aliaw			
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)						
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,				
	Date Pilot Now Oil 100			Choke Size			
	Length of Test	Tubing Pressure	Casing Pressure	MAR 13 1980			
	Actual Prod. During Test	Oil-Bbis.	Water - Bble.	OTE CON. COM.			
	Vefagt blood paring		<u> </u>	DIST. 3			
	GAS WELL Actual Prod. Toot-MCF/D	Length of Teet	Bbie. Condensate/MMCF	Gravity of Condensate			
	604	3 hrs.	Casing Pressure (Shut-in)	Choke Size			
	Testing Method (pitot, tack pr.) Positive choke	Tubing Preseure (Shut-in)	50#	3/4"			
-ء		CE	OIL CONSE	RVATION DIVISION			
Π	CERTIFICATE OF COMPLIAN			4 1980			
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED				
Division have been complied with and that the information given			BY Original Signed by FRANK T. CHAVEZ				

March 7, 1980

Division have been complied with and that the information given above is true and complete to the heat of my knowledge and belief.

Donald B. Wells (Signature)

District Production Manager (Title)

TITLE .

If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111. All sections of this form must be filled out completely for allow-shie on new and recompleted wells.

Fill out only Sections I. H. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition,

This form is to be filed in compliance with RULE 1104.

SUPERVISOR DISTRICT #, 3