

STATE OF NEW MEXICO
OIL AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1
RECEIVED
JUL 18 1986
OIL CON. DIV.
DIST. 3

Name William C. Russell	
Address 450 East 54th St., New York, NY 10022	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Recompletion Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate

Range of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name unt	Well No. 62-R	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. NM09867-A
Location Init Letter <u>H</u> : <u>1840</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>East</u> Line of Section <u>18</u> Township <u>30 North</u> Range <u>13 West</u> , NMPM, <u>San Juan</u> County				

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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Southern Union Gathering</u>	<u>P.O. Box 26400, Albuquerque, NM 87125</u>
Well produces oil or liquids, Location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When <u>no</u> <u>ASAP</u>

If production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.

Kerin H. McLeod
(Signature)
Agent
(Title)
7-17-86
(Date)

OIL CONSERVATION DIVISION
MAR 16 1987
APPROVED _____
BY _____ Original Signed by **FRANK T. CHAVEZ**
TITLE _____ SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
			X	X					
Date Spudded 11/9/85	Date Compl. Ready to Prod. 7/1/86		Total Depth 6341'		P.B.T.D. 6327'				
Elevations (DF, RKB, RT, CR, etc.) 5662' GL	Name of Producing Formation Dakota		Top Oil/Gas Pay 6092'		Tubing Depth 6115'				
Perforations 6177-6196, 6206-6236, 6092-6098, 6108-6114, 6152-6160						Depth Casing Shoe 6341'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12"	8-5/8"		220'		258 ft ³ Class B w/2% CaCl ₂				
7-7/8"	4 1/2"		6341'		1st: 412 ft ³ Class B tailed by 252 ft ³ 50-50 pozmix. 2nd: 1957 ft ³ Class B tailed by 63 ft ³ 50-50 pozmix				

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 2016	Length of Test 3hrs	Bbls. Condensate/MCF --	Gravity of Condensate --
Testing Method (pilot, back pr.) back pressure	Tubing Pressure (Shut-in) 1345	Casing Pressure (Shut-in) --	Choke Size 3/4"