Submit 5 copies Appropriate District Office DISTRICT I

I.

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

Name of Operator:	io.: 30-04 5	-27318										
Address of Operator:	P.O. E	Box 1237,	Durango	, Colora	do 8130	2-1237						
Reason(s) for Filing (chec	k prope	er area):		Other	(please	explain)	· · · · · · · · · · · · · · · · · · ·	M	F	6	Ar a Fr	
New well: X					Change	in Transport	er of:	N X	3	· 🐒 (
Recompletion: Change in Operator:				Oil:	ead Gas:		Dry Ga Conden	46. Fri	400		1000	
				Casingii	eau uas:		Conden	sate:	APH	13	1990	
If change of operator give and address of previous op		:						0		ON XXI.	DIV.	
II. DESCRIPTION	OF 1	WELL 2	AND L	EASE					/.	<i>~</i> 01.	<u> </u>	
Lease Name: Well No.: Pool Name, Including Fo Northeast Blanco Unit 472 Basin Fruitland (uding fo itl and C	rmation: oal	Kind Of Lease State, Federal Or Fee: SF-079045					
LOCATION Unit Letter: G; 1:	330 ft.	from the	eNorth li	ine and 1	1330 ft.	from the East	: line					
Section:29 To	wnship:	31N	Range:	7V, MMP1	I, Cou	enty: San Ju a	n					
III. DESIGNATION	n of	TRAN	SPORT!	er of	OIL	AND NATU	RAL GAS	3				
Name of Authorized Transporter of Oil: or Condensate: X Giant Transportation						Address (Give address to send approved copy of this form.) P.O. Box 12999, Scottsdale, AZ 85267						
Name of Authorized Trnsptr of Casinghead Gas: or Dry Gas: X Northwest Pipeline						Address (Give address to send approved copy of this form.) P.O. Box 58900 Salt Lake City, UT 84158						
If well produces oil or li give location of tanks.	es oil or liquids, Unit of tanks. G			Sec. Twp. Rgc 29 31N 7V		Is gas actually connected? No			When? 06/90			
If this production is comm	ingled	with the	t from ar	y other	lease or	pool, give co	ommingling o	rder number	:			
IV. COMPLETION I	DATA											
Designate Type of Completi	Oil Well Gas Well New Wel			l Workover	Deepen I	Plug Back	Same Res'v Diff Res'v					
Date Spudded: 01-04-90 Date Compl. Ready to Prod.: 02-21-90							Total Depth	otal Depth: 3337: P.B.T.D.: 3337:				
Elevations (DF, RKB, RT, GR, etc): Name of Producing Forms Fruitland Coal					tion:	Top Oil/Gas Pay: 3073'			Tubing Depth: 3235°			
Perforations: Open hole with an uncemented pre-perforated liner. (3073'-3337')							Depth Casi	Depth Casing Shoe: 5.5" @ 3336"; 7" @ 3073"				
open note aren ar areas	tou pre					CEMENTING	2 RECOR		3330			
HOLE SIZE	1	CASING & TUBING SIZE				DEPTH SE						
12.25"	 	9.625"				3061 2			5 cf of Class B Neat			
8.75"		7.000 ^H				30731		716 cf G POZ MIX/148 cf Class G Neat				
6.25"		5.500"				3017'-3336'		Uncemented				
	2.875"				32351			None				
V. TEST DATA AND OIL WELL	Test mu	-	ter reco	very of t	total vo	lume of load o	oil and must	be equal t	o or e	xceed t	op allowable	
Date First New Oil Run To Tank: Date of Test:						Producing Me (Flow, pump	thod: gas, lift, etc)					
Length of Test: Tubing Pr			Pressure	:		Casing Pressure:			Choke Size:			
Actual Prod. Test:	s.:			Water - Bbls.:			Gas-MCF:					
GAS WELL To be test	ed; com	pletion	gauges:	1600 M	CFD (wet	3/4" Choke),	and 3600 BV	D				
Actual Prod. Test - MCFD:	Length	of Test: 1 hr.			Bbls. Condensate/MMC N/A		Gravity of Condensate:					
Testing Method: Completion Gauge		Tubing Pressure: (shut-in) 580 psig			Casing Pressure: Ch (shut-in) 1180 psig		Choke Si	hoke Size: 3/4"				
VI. OPERATOR CE	RTIF	ICATE	OF C	OMPLI	ANCE		OIL				NOIBIAIC	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above								Date Approved APR 1 3 1990				
is true and complete to the best of my knowledge and belief.							By Original Signed by FRANK T. CHAVEZ					
Signature William F. Clark							Title_	Title DISTRICT .				
Title: Operations Manager		Date	: 11 Hj	ni 90								
Telephone No.: (303) 247-	-0728							<u> </u>				

- 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 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.

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