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Appropriate District 1997
DISTRIC 11
P.O. Box 1980, Inc. 22, 1994 68240

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Sanza Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drawer DD, Asteria, NM \$8210

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

EDIOF CHI CIE AND NATOTIAL CANC							Well API No.			
RCO Oil and Gas Company							30-045-275 2.7 < 2. 2.			
des 816 E. Mojave, Farm	ington, NM	87401								
mon(s) for Filing (Check proper bo	z)		***	Other	(Please explai	n)				
w Weil 🖂	Chan	ge in Transporter	r af:							
completice	Oil	Dry Ges								
sage is Operator	Casinghead Gas	Condenses		··						
name of operator give name										
•										
DESCRIPTION OF WE	L AND LEASE	No. Dool Nam	e Inchesia	e Formatica		Kind o	Lease	Les	se No.	
ese Name		Well No. Pool Name, Including 2 Basin Frui		_			State, Federal or Fee		SF078510	
acquez		, Dus 11.								
D	: 1370'	E - E	- No	cth rima	1295		st From The	East	Line	
Unit LetterD	:13/U	rea rou	106 1777		<u> </u>	<u></u> . •	A 1 ROLD 1122			
Section 6 Tow	mandip 31N	Range	8W	, NA	грм, Sa	in Juan			County	
30.002										
. DESIGNATION OF TR	ANSPORTER O	F OIL AND	NATUE	CAL GAS					-1	
me of Authorized Transporter of (ar C	codensate		Address (Give	address to wh	ich approved	copy of this form	u to be sen	1)	
ane of Authorized Transporter of (or Dry G	us [X]	Address (Give	eddress to wi	uch approved	copy of this form	LIT Q/	#) 108	
lorthwest Pipeline						When	ake City,	01 04	100	
well produces oil or liquids, re location of tanks.	Unit Sec.]Twp.	Kge.	ls gas actualiy	consected?	i when	1/29/90			
							2/ 25/ 50			
this production is commingled with COMPLETION DATA	that from may other as	ns or poor, give	COMMENSA	mg otoes mus						
. COMPLETION DATA	loi	Well G	us Well	New Well	Workover	Deepea	Plug Back Sa	me Res'v	Diff Res'v	
Designate Type of Comple			X	X		i i	Ĺ		1	
se Spudded	Date Compi. Re			Total Depth			P.B.T.D.			
1/18/89	1/7/90	r 1-29	- 90		3593		3	543		
evations (DF, RKB, RT, GR, etc.)	Name of Produc	ing Formation		Top Oil/Gas			Tubing Depth	2242	,	
6548 GR 6561	KB Basin Fr	uitland	Coal		3282			3243		
eforations							Depth Casing S			
3282-3445							359	7 1		
		TUBING, CASING AND			CEMENTING RECORD			SACKS CEMENT		
HOLE SIZE		CASING & TUBING SIZE			DEPTH SET 503			325		
12 1/4		5/8 1/2		359			750			
7 7/8		7/8		324		7.7	1			
		770			<u></u>					
. TEST DATA AND REC	UEST FOR ALL	OWABLE		1						
IL WELL (Test must be	after recovery of total	roturne of load o	d and must	be equal to o	r exceed top al	lowable for th	is depth or be for	full 24 hou	rs.)	
nte First New Oil Rue To Tank	Date of Test	Date of Test			Producing Method (Flow, pump, gas lift. Gas Lift			1 4	FIR	
1-29-90	1-2	1-29-90			Gas Lift []			Code Size		
ength of Test	Tubing Pressur	2		Casing Presi	Life	Įį.	Choke Size	- 1000	E	
sugar or res								2 199LL		
				Water Day			GAL MCF	3-1000		
	Oil - Bbls			Water - Bbi			GMARO:		11/	
	Oil - Bbis.			Water - Bbi	<u> </u>		OIL CO	N. D	V_	
CAS WELL							OIL CO	N. D	IV	
GAS WELL ACTUAL Prod. Test - MCF/D	Length of Test			Bbis. Conde	neste/MMCF		OIL CO	N. D	<u> </u>	
GAS WELL Actual Prod. Test - MCF/D 201	Length of Test	S		Bbis. Conde	nede/MMCF		OIL CO	N. D	<u> </u>	
GAS WELL count Prod. Test - MCF/D 201 string Method (picot, back pr.)	Length of Test 24 hr	S re (Shut-m)		Bbis. Conde 0 Casing Pres	nate/MMCF	7	DIS Crayery of Co N/A Choke Size	N. D T. 3	<u></u>	
COLDINATION COLDINATION COLDINATION COLDINATION COLD COLD COLD COLD COLD COLD COLD COLD	Length of Test 24 hrs Tubing Pressu 900 p	S re (Shut-a) S İ		Bbis. Conde 0 Casing Pres	mate/MMCF	2	DIS Crayery of Co N/A Choice Size Variab	N. D T. 3 edenante		
Chief Prod. During Test GAS WELL Chief Prod. Test - MCF/D 201 string Method (pict, back pr.) Orifice Meter /L OPERATOR CERT	Length of Test 24 hrs Tubing Pressu 900 p	s re (Shut-m) s i COMPLIAN	NCE	Bbis. Conde 0 Casing Pres	mate/MMCF	NSER\	DIS Crayery of Co N/A Choice Size Variab	N. D T. 3 edenante		
Chief Prod. During Test CAS WELL Chief Prod. Test - MCF/D 201 esting Method (picot, back pr.) Orifice Meter /L OPERATOR CERT hereby certify that the rules an	Length of Test 24 hr: Tubung Pressu 900 p: IFICATE OF C	S re (Shut-m) S i COMPLIAN Connervation		Bbis. Conde 0 Casing Pres	mate/MMCF	NSER\	DIL CO DIS OF STREET OF CO N/A Choice Size Variab	N. D. T. 3 selections le DIVISIO		
GAS WELL Actual Prod. Test - MCF/D 201 esting Method (picot, back pr.) Orifice Meter VL OPERATOR CERT I hereby certify that the rules an	Length of Test 24 hr: Tubung Pressu 900 p: IFICATE OF Cold regulations of the Oil th and that the informa-	S re (Shut-in) S i COMPLIAN Connervation tion given above		Bbis. Conds 0 Casing Pres	eure (Shut-in) /A OIL CO		DIS Crayery of Co N/A Choice Size Variab	N. D. T. 3 selections le DIVISIO		
GAS WELL Actual Prod. Test - MCF/D 201 esting Method (picot, back pr.) Orifice Meter /L OPERATOR CERT I hereby certify that the rules an Division have been complied with true and complete to the best	Length of Test 24 hrs Tubing Pressu 900 p IFICATE OF Cold regulations of the Oil th and that the information of my knowledge and length of the oil of	S re (Shut-in) S i COMPLIAN Connervation tion given above		Bbis. Conds 0 Casing Pres	e Approv	ed	OIL CO DIS OF STATE N/A Choice Size Variab /ATION [MAR 0 2	N. D. T. 3 selections le DIVISIO	· .	
CAS WELL COLOR Prod. Test - MCF/D 201 esting Method (picot, back pr.) Orifice Meter /L OPERATOR CERT I hereby certify that the rules an Division have been complied with true and complete to the best	Length of Test 24 hrs Tubing Pressu 900 p IFICATE OF Cold regulations of the Oil th and that the information of my knowledge and length of the oil of	S re (Shut-in) S i COMPLIAN Connervation tion given above		Bbis. Conds 0 Casing Pres	OIL CO	ed	OIL CO DIS OF STATE N/A Choice Size Variab /ATION [MAR 0 2	N. D. T. 3 selections le DIVISIO	· .	
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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.

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