

MULTI-POINT BACK PRESSURE TEST FOR GAS WELLS

Pool Blanco Mesaverte Formation Mesaverte County SAN JUAN
 Initial _____ Annual _____ Special Worker Date of Test 8/24/62
 Company Artec Oil and Gas Lease DAVIS Well No. 1
 Unit E Sec. 11 Twp. 31N Rge. 12W Purchaser Southern Union Gathering
 Casing 4 1/2 Wt. 95 I.D. 4.000 Set at 5326 Perf. 5048 To 5310
 Tubing 2 3/8 Wt. 41 I.D. 1.995 Set at 5018 Perf. Pin collar To _____
 Gas Pay: From 5048 To 5310 L 5018 xG. 700 -GL 3513 Bar. Press. 12
 Producing thru: Casing _____ Tubing ☒ Type Well SINGLE - GAS
 Date of Completion: 8/17/62 Packer _____ Reservoir Temp. _____
 Recompletion: _____ Single-Bradenhead-G. G. or G.O. Dual _____

OBSERVED DATA

Tested Through (Packer) (Choke) (Motor)

Type Taps _____

No.	Flow Data					Tubing Data		Casing Data		Duration of Flow Hr.
	(Packer) (Line) Size	(Choke) (Casing) Size	Press. psig	Diff. h _w	Temp. °F.	Press. psig	Temp. °F.	Press. psig	Temp. °F.	
SI										
1.	2"	3/4"				869		871		
2.						133	60°ent	378	60°ent	3
3.										
4.										
5.										

FLOW CALCULATIONS

No.	Coefficient (24-Hour)	$\sqrt{h_{wpf}}$	Pressure psia	Flow Temp. Factor F _t	Gravity Factor F _g	Compress. Factor F _{pv}	Rate of Flow Q-MCFPD @ 15.025 psia
1.	12.3650		145	1.000	.9258	1.017	1,688
2.							
3.							
4.							
5.							

PRESSURE CALCULATIONS

Gas Liquid Hydrocarbon Ratio _____ cf/bbl.
 Gravity of Liquid Hydrocarbons _____ deg.
 P_c _____ (1-e^{-S})

Specific Gravity Separator Gas _____
 Specific Gravity Flowing Fluid _____
 P_c 883 P_c 779,689

No.	P _w P _t (psia)	P _t ²	F _c Q	(F _c Q) ²	(F _c Q) ² (1-e ^{-S})	P _w ²	P _c ² -P _w ²	Cal. P _w	P _w P _c
1.	390					152,100	622,589		1.722
2.									
3.									
4.									
5.									

Absolute Potential: 1986 MCFPD; n .75
 COMPANY Artec Oil and Gas
 ADDRESS Drawer 570 Farmington, New Mexico
 AGENT and TITLE B. A. Massey DISTRICT ENGINEER
 WITNESSED _____
 COMPANY _____

REMARKS

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		2
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator	
Aztec Oil and Gas	
Address	
Drawer 570, Farmington, New Mexico	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Davis	1	Blanco Mesaverde	State, Federal or Fee	
Location				
Unit Letter	E	1650 Feet From The	N	Line and 990 Feet From The
Line of Section	11	Township	31N	Range 12W, NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
New Mexico Tankers to Shell	Box 2151, Farmington, New Mexico					
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)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					yes	

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.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

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

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

ORIGINAL SIGNED BY JOE C. SALMON

(Signature)

District Superintendent

(Title)

December 21, 1966

(Date)

OIL CONSERVATION COMMISSION

APPROVED **DEC 23 1966**, 19
BY **Original Signed by Emery C. Arnold**
TITLE **SUPERVISOR DIST. #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.

XERO COPY

XERO COPY

XERO COPY

XERO COPY