

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

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

Form C-104
Revised 10-01-78
Format 06-01-83

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NOV 19 1984

OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Lobo Production

Address PO Box 2364 Farmington NM 87499

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recombination	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Coastinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Scorpio</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Wildcat Gallup</u>	Kind of Lease State, Federal or Fee <u>Fed USA</u>	Lease No. <u>SF078818A</u>
Location Unit Letter <u>A</u> : <u>935</u> Feet From The <u>FNL</u> Line and <u>810</u> Feet From The <u>FEL</u>				
Line of Section <u>Sec. 15</u> Township <u>32N</u> Range <u>13W</u> , 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)
<u>Giant Refinery Refining Co.</u>	<u>PO Bxo 256 Farmington NM 87499</u>
Name of Authorized Transporter of Coastinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas</u>	<u>Petroleum Club Plaza Farmington NM 87401</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>A</u> Sec. <u>15</u> Twp. <u>32N</u> Rge. <u>13W</u>	<u>NO</u> <u>December 1, 1984</u>

If this 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.

VI. 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.

[Signature]
(Signature)
Operators
(Title)
11-15-84
(Date)

OIL CONSERVATION DIVISION
12/19/84
APPROVED DEC 19 1984, 19
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 Res'y.	Diff. Res'y.
		X						
Date Spudded 5-25-84	Date Compl. Ready to Prod. 6-29-84	Total Depth 4645'	P.B.T.D. 4628'					
Elevations (DF, RKB, RT, GR, etc.) 6004.0 Gr	Name of Producing Formation Wildcat Gallup	Top Oil/Gas Pay 2542'	Tubing Depth 2450					
Perforations Lower Gallup 4381-3756' Mid 3683'-2825' Upper 2600-2542"						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8" 36#	225'	126 c.f.
7 7/8"	7" 23# J-55	2652'	531 c.f.
6 1/4"	5 1/2" 15.5# J-55	2485-4544'	185 c.f.
	1 1/4"	2450	

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lost oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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
Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 260	Length of Test 3	Bbls. Condensate/MCF 0	Gravity of Condensate 0
Tubing Method (plug, back pr.) bk pr.	Tubing Pressure (Shut-In) 6660	Casing Pressure (Shut-In) 658	Choke Size 3/4"