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LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
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

Operator: **Consolidated Oil & Gas, Inc.**

Address: **1860 Lincoln Street, Denver, Colorado 80295**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of: Oil Dry Gas

Recompletion Casinghead Gas Condensate

Change in Ownership

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Huron	Well No. 3-A	Pool Name, including Formation Blanco Mesaverde	Kind of Lease Federal State, Federal or Fee
Location: Unit Letter J # , 1800 Feet From The south Line and 790 Feet From The east			
Line of Section 2 , Township 26N Range 4W , NMPM, Rio Arriba County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Inland Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1528, Farmington, New Mexico 87401		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) First International Bldg, Dallas, Texas 75270		
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 2	Twp. 26N
			Rge. 4W
	Is gas actually connected?		When
	No		

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.
		X						
Date Spudded 11/12/77	Date Compl. Ready to Prod. 1/17/78	Total Depth 6370'		P.B.T.D. 6319'				
Pool Blanco	Name of Producing Formation Mesaverde	Top Oil/Gas Pay 5679'		Tubing Depth 6029'				
Perforations 5679-6230'		34 holes		Depth Casing Shoe 6360'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	10-3/4"		291'		300 sx.			
8-3/4"	7"		4270'		250 sx.			
6-1/4"	4-1/2 liner		6360'		250 sx.			
	1-1/2"		6029'					

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

GAS WELL

Actual Prod. Test-MCF/D CV-2886, AOF 3095	Length of Test 3 hrs.	Bbls. Condensate/MMCF zero	Gravity of Condensate
Testing Method (pitot, back pr.) 1 pt. potential	Tubing Pressure 290 psi	Casing Pressure 195 psi	Choke Size 3/4

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.

D.T. Stogner, Jr.
(Signature)
Chief Drilling and Production Engineer
(Title)
February 10, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **Original Signed by A. R. Kendrick**
TITLE _____

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 Sections I, II, III, and VI only 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.