

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

Form C-104
Revised 10-1-78

B.K.

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SANTA FE	
FILE	
U.S.U.S.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Zenith Energy Corporation

Address

P.O. Box 1038 Kilgore, Texas 75662

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name SFPRR	Well No. 24	Pool Name, Including Formation Miguel Creek Gallup-Hospah	Kind of Lease State, Federal or Free	Lease No. 0-9725
Location				
Unit Letter <u>A</u> : <u>330'</u> Feet From The <u>North</u> Line and <u>990'</u> Feet From The <u>East</u>				
Line of Section <u>29</u> Township <u>16N</u> Range <u>6W</u> , NMPM, <u>McKinley</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refiners	Address (Give address to which approved copy of this form is to be sent) 1616 Glenarm Place, Suite 1230 Denver Colo. 802
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 <u>A</u> Sec. <u>29</u> Twp. <u>16N</u> Rge. <u>6W</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Test v. <input type="checkbox"/>	Diff. <input type="checkbox"/>	Rea <input type="checkbox"/>
Date Spudded 7-25-80	Date Compl. Ready to Prod. 8-28-80	Total Depth 775'		P.B.T.D. 775'					
Elevations (DF, RKB, RT, CR, etc.) 6427 GL	Name of Producing Formation Hospah	Top Oil/Gas Pay 745'		Tubing Depth 745'					
Perforations 745'-755', 759'-763', 765'-768'		Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 greater than the allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 8-28-80	Date of Test 9-4-80	Producing Method (Flow, pump, gas lift, etc.) Pump to test tank	
Length of Test 24 hr	Tubing Pressure 0	Casing Pressure 0	Choke Size Full
Actual Prod. During Test 20	Oil-Bbls. 16	Water-Bbls. 4	Gas-MCF ---

GAS WELL

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

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 above is true and complete to the best of my knowledge and belief.

Dary Blanks
(Signature)

Representative

(Title)

9-5-80

(Date)

OIL CONSERVATION DIVISION

OC 1 9 1980

APPROVED _____, 19

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #3

TITLE

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 1104.

All sections of this form must be filled out completely for allowable on new and reworked 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 conditions.

Separate Forms C-104 must be filed for each pool in multiple completed wells.