STATE OF HAVE THE HEAD. CALIFORNIA CONTROL CON

OIL CONSERVATION DIVISION P. O. BOX 2088

| fur | SANTA FE, NEV | W MEXICO 87501 | |
|--|---|---|--|
| 0.16.8. | | | 4:17 |
| LAND OFFICE | REQUEST FO | R ALLOWABLE | 2 K |
| TRANSPORTER OIL | | ND | 2 |
| GERATON | AUTHORIZATION TO TRANS | PORT OIL AND NATURAL GAS | |
| Chetaint Office | | | |
| James L. Ludwick | | | |
| Address | | | W RAM. |
| | , New Mexico 87499 | | CH CE TWO |
| Peason(s) for filing (Check proper bo | Change in Transporter of: | Other (Please explain) | Jan & B. R. Kar |
| Recompletion | Cil Dry Co | | 10 19 10 mg 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Change in Ownership | Casinghead Gus Conde | 二 二 二 | |
| | | | |
| If change of ownership give name and address of previous owner | | | |
| | | | |
| DESCRIPTION OF WELL AND | LEASE Well No. Pool Name, Including F | ormution Kind of Lea | |
| Lease Name Indian 17 | 1 | | ral XXXX NOO-C-14-20-5530 |
| Location | - Jonasa gracea (| redaverde (OII) (AKA | 1-1 AAAA 1100-C-14F20-3330 |
| L 2 | 310 South | ne andFeet From | West |
| Unit Letter;; | Feet From TheLir | reet / for | n ine |
| Line of Section 17 To | ownship 19N Range | 5W , NMPM, McK | inley County |
| | | | |
| | TER OF OIL AND NATURAL GA | AS | |
| Mome of Authorized Transporter of Ci The Permian Corpor | | j | roved copy of this form is to be sent) |
| Name of Authorized Transporter of Co | | Box 1183, Houston, Tex | roved copy of this form is to be sent) |
| Gas Company of New | - | Box 1899, Bloomfield, | |
| | Unit Sec. Twp. Rge. | | then the tree of t |
| ili well produces oil or liquids, give location of tanks. | | No ! | |
| White production is commingled w | ith that from any other lease or pool, | give commingling order number: | |
| COMPLETION DATA | | | |
| Designate Type of Completi | on - (X) | New Well Workover Deepen | Plug Back Same Resty. Diff. Resty. |
| Designate Type of Completi | | X | |
| Cate Spudded 6/13/85 | Date Compl. Ready to Prod. 6/25/85 | Total Depth 1905 | P.B.T.D. |
| Elevations (D) 3, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | 1796 Tubing Depth |
| 6641GR | Mesaverde | 1584 | None |
| Perforations | | | Depth Casing Shoe |
| 2 shots per foot a | s follows: 1584-95', 1824 | 4-32 ', 1838-48' | 1905 |
| | TUBING, CASING, AND | CEMENTING RECORD | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 9 7/8" | 7" | 63' | 41 Cu Ft. Circulated |
| 5 1/8" | 2 7/8" | 1905' | 295 Cu Ft. Circulated |
| | | | |
| The state of the s | J. C. ALLOWANT F. CT | / | l and must be equal to or excend top allow |
| THAT DATA AND REQUEST F | | pth or be for full 24 hours) | is and mast be equal to be exceed top diseas |
| Late First New Oil Hun To Tanks | Date of Tres | Producing Method (Flow, pump, gas | lifi, etc.) |
| 6/25/85 | 6/25/85 | Flow | |
| Length of Test | Tubing Pressure | Casing Preseure | Choke Size |
| 3 Hours | | 450 psi (Shut-in) | 1" Gom • MCF |
| Actual Pred. During Test | Oil-Sble. Trace / | Water - Bble. | 43 MCF (350 MCFP)) |
| ! | Trace / | <u></u> | 47 MC (330 MC 17) |
| GAS WELL | | | |
| Actual Frod. Tool-WZF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| | | | |
| Testing kiethod (pitot, back pr.) | Tubing Pressure (shut-in) | Cosing Pressure (Shut-in) | Choke Size |
| | | | |
| CERTIFICATE OF COMPLIAN | CE | OIL CONSERVA | TION DIVISION |
| | | ************************************** | JUL 1 0 1985 |
| 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. | | Original Signed by FRANK T. CHAVEZ | |
| | | BY | |
| • | | TITLE | SUPERVISOR DISTRICT # 3 |
| / | | | |
| ar Lind | 2 | This form is to be filed in | compliance with RULE 110%. |
| UK XIII | MCXT | If this is a request for allower this form must be accomp | smiled by a tabulation of the davistion |

| | · | | |
|-----|------------------------|--|--|
| | / | | |
| 10. | Villace | V | |
| | Kenful Amelinature) | <u> </u> | |
| | Agent | and the state of t | |

July 9, 1985

(Date)

tests taken on the well in accordance with RULE 111.

All rections of this form must be filled out completely or 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 is multiply completed wells.