

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		
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-111
Effective 1-1-65

212

I. Operator
Dave M. Thomas, Jr.

Address
PO Box 2026, Farmington, NM 87401

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Chacon Jicarilla Apache "D"	Well No. 5	Pool Name, Including Formation Chacon Dakota	Kind of Lease Jicarilla State, Federal or Fee Indian	Lease No. cont.# 412
Location Unit Letter C ; 330 Feet From The North Line and 2,310 Feet From The West Line of Section 16 Township 23N Range 3W, 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"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) PO Box 1702, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Gas Company	Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 16	Twp. 23N	Rge. 3W	Is gas actually connected? NO	When Unknown

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 <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 Res. <input type="checkbox"/>	Diff. Res. <input type="checkbox"/>
Date Spudded 9-27-76	Date Compl. Ready to Prod. 11-11-76		Total Depth 7700'		P.B.T.D. 7588'			
Elevations (DF, RKB, RT, GR, etc.) 7359' GR, 7372' DF, 7373' KB	Name of Producing Formation Dakota		Top Oil/Gas Pay 7358'		Tubing Depth 7419'			
Perforations 7358'-7396', 7413'-7419' and 7476'-7492'.					Depth Casing Shoe 7698'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8-5/8"		258		200			
7-7/8"	4 1/2"		7698		450			
	2-3/8"		7419					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 11-20-76	Date of Test 11-26-76	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 130	Casing Pressure 400	Choke Size 3/4"
Actual Prod. During Test	Oil - Bbls. 60	Water - Bbls. -0-	Gas - MCF 220

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	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.
For: Dave M. Thomas, Jr.

Ewell N. Walsh (Signature) P. E.

President, Walsh Engineering & Production Corporation 11-30-76
(Date)

OIL CONSERVATION COMMISSION
APPROVED
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR

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 deviated 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 multiple completed wells.