

OIL CONSERVATION DIVISION

P O BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Jerome P. McHughAddress
P O Box 208, Farmington, NM 87401

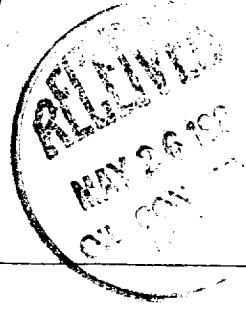
Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

3.C.
3028NIf change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|---------------|---|---|----------------------|
| Lease Name Gallo White | Well No. 1 | Pool Name, Including Formation Undesignated Gallup | Kind of Lease State, Federal or Fee Fed. | Lease No. NM41721 |
| Location Unit Letter J : 2000 Feet From The South Line and 1660 Feet From The East Line of Section 14 Township 23N Range 6W , NMPM, Rio Arriba 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 Refining, Inc. | Address (Give address to which approved copy of this form is to be sent) Box 256, Farmington, NM 87401 |
| 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 J Sec. 14 Twp. 23N Rge. 6W Is gas actually connected? No When |

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 | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 5-2-82 | Date Compl. Ready to Prod. 5-22-82 | Total Depth 5566' | P.B.T.D. 5537' | | | | | |
| Elevations (DF, RKB, RT, CR, etc.) 6809' GL | Name of Producing Formation Gallup | Top Oil/Gas Pay 5194 | Tubing Depth 5440' RKB | | | | | |
| Perforations 5194-5524, 56 holes | | | Depth Casing Shoe 5566' RKB. | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|---------------------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 12-1/4" | 9-5/8" | 202' RKB | 150 sx to surface |
| 7-7/8" | 4-1/2" | 5566' RKB | 175 sx 1st stage |
| | | | 550 sx 2nd stage to surf. |
| | 2-3/8" | 5440' RKB | |

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 5-19-82 | Date of Test 5-22-82 | Producing Method (Flow, pump, gas lift, etc.) flowing | |
| Length of Test 8 hrs | Tubing Pressure 0 | Casing Pressure 600 psi | Choke Size NA |
| Actual Prod. During Test | Oil-Bbls. 60 BOPD | Water-Bbls. 24 frac water | Gas-MCF 105 MCFGPD |

GAS WELL

| | | | |
|-----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pistol, 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.

Thomas A. Dugan (Signature)
Agent

5-25-82

(Date)

OIL CONSERVATION DIVISION

APPROVED

Original Signed by FRANK T. CHAVEZ

BY

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 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.