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LAND OFFICE	
TRANSPORTER	OIL GAS
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.  
Effective 1-1-65

B.K.

API 30-039-21897

Operator Cotton Petroleum Corporation	
Address 717 17th Street, Suite 2200, Denver, Colorado 80202	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Apache	Well No. 122	Pool Name, Including Formation Lindrith Gallup Dakota W	Kind of Lease Jicarilla Indian	Lease No. 129
Location				
Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East				
Line of Section 13 Township 24N 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"/>	Address (Give address to which approved copy of this form is to be sent) Basin Incorporated 511 W. Ohio Street, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) El Paso Natural Gas Company P. O. Box 990, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 13	Twp. 24N	Rge. 4W	Is gas actually connected? Yes	When 4-19-79

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 (X)	Gas Well	New Well (X)	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded 2-20-79	Date Compl. Ready to Prod. 4-19-79	Total Depth 7550'	P.B.T.D. 7500					
Elevations (DF, RKB, RT, GR, etc.) 6892' GR	Name of Producing Formation Gallup Dakota	Top Oil/Gas Pay 6302	Tubing Depth 6304					
Perforations 6302-46, 7214-60, 7414-42	Depth Casing Shoe 7550'							

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	390'	275 sxs to surface
7-7/8"	4-1/2"	7550'	stage 1 600 sxs
		stage 2	725 sxs
		DV tool @ 4109'	

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 4-19-79	Date of Test 4-27-79	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 220	Casing Pressure 0	Choke Size 25/64"
Actual Prod. During Test	Oil-Bble. 100	Water-Bble. 125 Load	Gas-MCF 35

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. 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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature)  
Division Production Manager  
(Title)  
4-27-79  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 2 1979  
BY Original Signed by A. R. Kendrick  
TITLE SUPERVISOR DIST. #3

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.