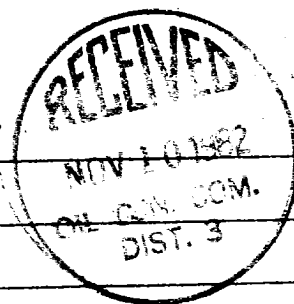


OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

3112N

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

J. Felix Hickman

P.O. Box 12307 El Paso, Texas 79912

Division(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)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name: Schmitz Well No.: 2 Pool Name, Including Formation: Ojito Gallup Dakota Kind of Lease: State, Federal or Fee Federal Lease No.: NM03556

Location: Section 8 Township 25N Range 3W, NMPM, Rio Arriba County
1850 Feet From The N Line and 790' Feet From The W

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent) P.O. Box 1702, Farm. N. Mex. 87401
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289, Farm. N. Mex. 87499-4289
El Paso Natural Gas Co. Unit: E Sec: 6 Twp: 25 Rge: 3 Is gas actually connected? No When Contract approval

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 ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐
Date Spudded: 8-2-82 Date Compl. Ready to Prod.: 8-21-82 Total Depth: 8160 P.B.T.D.: 8117
Deviation (D) (N, RT, GR, etc.): 7298 K.B. Name of Producing Formation: Gallup/Dakota Top Oil/Gas Pay: 7132 Tubing Depth: 8035
Perforations: 7243 Depth Casing Shoe: 8159
7132-44, 7150-74, 7205, 7247, 7260-61, 7290-7300, 7346-94, 7408-24, 8008-8050, 28 holesTUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12 1/4 9 5/8 220' 150 sx.
8 3/4 7" 6300' 450 sx.
6 3/4 4 1/2 8159 375 sx.
3 3/4 3 3/4 8235

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)

OIL WELL
Date First New Oil Run To Tanks: 8-21-82 Date of Test: 10-29-82 Producing Method (Flow, pump, gas lift, etc.): Flow
Length of Test: 3 hours Tubing Pressure: 317 Flowing Casing Pressure: Dual-None Choke Size: 8/64
Total Prod. During Test: 12 bbls. oil Oil-Bbls.: 12 bbls-3 hours Water-Bbls.: 12-bbls-3hours Gas-MCF: 68MCF/Test-3 hours
96 (24 hrs.) 96 (24 hours) 546 MCF/D
Frac WaterGAS WELL
Length of Test: 3 hours Bbls. Condensate/MCF: Gravity of Condensate
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 is true and complete to the best of my knowledge and belief.

Agent (Signature)

(Title)

11-6-1982

(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____

BY _____

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 Form C-104 must be filed for each pool in multiply completed wells.