0	IMIC	DE TACAA	MICHICO	
ENERGY	AND M	INERALS	DEPARTME	NT

DISTRIBUTION			
SANTA FE			
FILE			
U.A.U.B.			
LAND OFFICE			
TRANSPORTER	DIL		
	DAS		
OPERATOR			
PROPATION OPPICE			

Ш.

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

U.S.U.S.		•	•					
TRANSPORTER DIL	REQUEST FOR ALLOWABLE							
OPERATOR  PRODUCTION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
Operator  GREAT WESTERN RES	OURCES INC		<del></del>					
Address			<u></u>	<u> </u>	·			
9800 Centre Parkward Reason(s) for filing (Check proper bo	ay, Suite 900, Houston,							
New Well	Change in Transporter of:	Other (Pi	ease explain)	ANGE OF OPERATO	p			
Recompletion Change in Ownership X	OII Dry Casinghead Gas Cond	Gas From		n & Associates,	_			
If change of ownership give name and address of previous owner	W. B. Martin & Associ	T	9 North But rmington, h					
I. DESCRIPTION OF WELL AND								
Martin-Whittaker	Well No. Pool Name, including 55 W. Lindrith G		Kind of Leas	•• Jicarilla Apac <sup>al or F••</sup> (Federal)	363			
Location	33   11. 12. 12. 12. 12. 12. 12. 12. 12. 12.	arzap Battota Ba	State, 1 days	(Federal)	]			
Unit Letter E : 17	740 Feet From The North L	ine and 960	Feet From	The West	<del> </del>			
Line of Section 16 To	ownship 24N Range	4W , NN	ІРМ,	Rio Arriba	Count			
. DESIGNATION OF TRANSPOR			es to which appro	ved copy of this form is t	n he seri!			
Giant Refining Company				ton, NM 87499	o be senij			
Name of Authorized Transporter of Co		Address (Give address to which approved copy of this form is to be sent)						
El Paso Natural Gas Con	mpany   Unit   Sec.   Twp.   Rge.	P. O. Box 1492, El Paso, TX 79978						
If well produces oil or liquids, give location of lanks.	E 16 24N 4W	No !						
If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	, give commingling or	der number:					
Designate Type of Completic	on — (X) Oil Well Gas Well	New Well Workove	Deepen	Plug Back   Same Res	v. Dill. Res			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	· · · · · · · · · · · · · · · · · · ·	P.B.T.D.	<del></del>			
10/10/84 Elevations (DF, RKB, RT, GR, etc.)	11/24/84   Name of Producing Formation	7284 Top Oil/Gas Pay		7273				
6789 GR	Gallup-Greenhorn-Dako			7152				
6066-6248, 6895-7036, 7	<del></del>			Depth Casing Shoe 7273	-			
HOLE SIZE	TUBING, CASING, AND	<u> </u>	····	SACKE CTU				
121"	9-5/8" casing	282		206.5 <sup>13</sup>	ENT			
8-3/4"	7" casing	5115		58513				
61"	43"	7273		371'3				
	2-3/8" tubing	7152	· · · · · · · · · · · · · · · · · · ·	<u>i</u>	·			
TEST DATA AND REQUEST FO		fter recovery of total vo pth or be for full 24 hou		and must be equal to or ex	ceed top allo			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	ow, pump, gas lift	, etc.)				
Length of Test	Tubing Pressure	Casing Pressure		Chore San	<u> </u>			
Actual Prod. During Test	Oil-Bbla.	Water - Bbis.		Gas-MCF				
			JUL2					
GAS WELL Actual Prod. Test-MCF/D	Length of Test	OIL CON. DIV.						
	Tubing Pressure (Shut-in)							
resting Method (phib), bath proj	Aming Plessma (Spit-19)	Coming Pressure ( shu	sing Presswe (Shut-in)		Choke Size			
CERTIFICATE OF COMPLIANCE	E	OIL C	ONSERVATI	ON DIVISION 2 8 19	86			
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.		APPROVED						
· · ·	TITLE		SUPERVISOR USTRICT # 5					
Sull +		This form is to	•	mpliance with RULE	•			
Kathy Carten (Signal)	we) .	well, this form mus	t be accompani-	ble for a newly drilled ed by a tabulation of t	or despensi he devistion			
Engineering Assistant	· · · · · · · · · · · · · · · · · · ·	tests taken on the	well in accords	ince with RULE 111.				

(Title)

7/24/86

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,