## PO OF LEPIES STEINES DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OPERATOR

## OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

3089 /R-

## REQUEST FOR ALLOWABLE AND LITHOPIZATION TO TRANSPORT OIL AND NATI

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS. PROBATION OFFICE Operator Cotton Petroleum Corporation Address 80209 3773 Cherry Creek Drive North Suite 750 Denver, Co. Reason(s) for filing (Check proper box) Other (Please explain) IXΠ Change in Transporter of: Dry Gas Recompletion CIL Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner 1. DESCRIPTION OF WELL AND LEASE Lease No Pool Name, Including Formation Jicarilla Fee Apache ell No. 143 Lindrith Gallup Dakota W Apache State, Federal or Fee Location North Line and 2171' East 3006 Unit Letter 24N 4W . NMPM. Rio Arriba 2 County Township Range Line of Section II. 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. 1267 Ponca City OK 74603 Conoco Inc. Surfac sportation Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas 1279 E. 21st St. Farmington, NM 87401 El Paso Natural Gas Co. When is gas actually connected? <sup>l</sup> Unit If well produces oil or liquids, 24N 4W 5-11-85 i 2 Yes G give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Same Restv. Diff. Res Workover Gas Well Oil Well Designate Type of Completion - (X) Χ χ Date Spudded 2-16-85 P.B.T.D. Total Depth Date Compl. Ready to Prod. 76621 7640' 5-10-85 Top Oll/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) 6959 GR Name of Producing Formation 7347" 7374 'KB Dakota Depth Casing Shoe Perforations 76621 7377-7382', 7392-7401' , 7406-7411' , 7447-7454 7582-7592', 7568-757<u>6',</u> TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE 8-5/8 DEPTH SET HOLE SIZE 400' 250 12岁" 7662' <u>stage -</u> 41/2 585 SxS 7-778 2nd stage - 520 SxS 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 alice

able for this depth or be for full 24 hours) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test 6-4-85 Pumping 5-10-85 Choke Size Casing Pressure Tubing Preseure Length of Test 145 24 145 Water - Bble. Actual Prod. During Test OII - Bbls. 40 100 5 **GAS WELL** Gravity of Condensate Bbis. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Casing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) OIL CONSERVATION DIVISION 25 1985 VI. CERTIFICATE OF COMPLIANCE 6-25-85 APPROVED 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. Original Signed by FRANK T. CHAVEZ BY. SUPERVISOR DISTRICT # 8

DE. Wood RRF

(Signature)

Division Production Manager

(Title)

6-11-85

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviatic 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 ownewell name or number, or transporter, or other such change of conditio. Separate Forms C-104 must be filed for each pool in multip; completed wells.