

CONFIDENTIAL

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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AND OFFICE	
TRANSPORTER	OIL
PERATOR	GAS
ORATION OFFICE	

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Mallon Oil Company	
Address 2750 Security Life Building, Denver, CO 80202	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gashead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
Revise to include tubing report	

Change of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name Howard Fed	Well No. 1-11	Pool Name, Including Formation Undesignated Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. NM 40644
Location Unit Letter <u>K</u> : <u>1850</u> Feet From The <u>South</u> Line and <u>1675</u> Feet From The <u>West</u> Line of Section <u>1</u> Township <u>25 North</u> Range <u>2 West</u> , NMPM, Rio Arriba County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

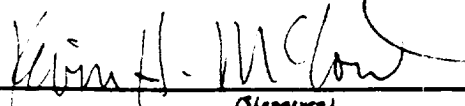
Line of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mancos Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1320, Farmington, NM 87499					
Line of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Gavilan Joint Venture	Address (Give address to which approved copy of this form is to be sent) 2850 Security Life Building, Denver, CO 80202					
Well produces oil or liquids, or location of tanks.	Unit K	Sec. 1	Twp. 25N	Rge. 2W	Is gas actually connected? Yes	When 1-3-86

Is this production commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

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.


(Signature)
Agent
(Title)
2-25-86
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 1986
Original Signed by FRANK T. CHAVEZ
BY _____
TITLE _____ SUPERVISOR DISTRICT #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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res.	Diff. Res.
Date Spudded 9/15/85	Date Compl. Ready to Prod.		Total Depth 8276'			P.B.T.D. 8217'			
Elevations (DF, RKB, RT, CR, etc.), 7547' GL	Name of Producing Formation Gallup		Top Oil/Gas Pay 6931'			Tubing Depth none			
Perforations 6931, 6939, 6955, 6962, 6976, 6985, 6998, 7008, 7015, 7026, 7040, 7050, 7069, 7079, 7098, 7111, 7126, 7136, 7146, 7151, (cont. on bottom)							Depth Casing Shoe 8240'		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	9-5/8"		258'		140 sx Class B w/2% CaCl ₂				
7-7/8"	5-1/2"		8249'		350 sx 50-50 pozmix w/2% gel, and 100				
	2-7/8"		7795'		sx Class B w/2% D-79 tailed by 175 sx				
					50-50 pozmix.				

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lost 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 11/8/85	Date of Test 11/8/85	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 10	Tubing Pressure	Casing Pressure 450	Choke Size
Actual Prod. During Test	Oil - Bbls. 18 4/5	Water - Bbls. 42 10/1	Gas - MCF --

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (plug, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

Perfs: 7157, 7163, 7169, 7177, 7184, 7187, 7202, 7209, 7220, 7232, 7247, 7265, 7282, 7296, 7313, 7318, 7333, 7339, 7345, 7363, 7376, 7386, 7397, 7407, 7415, 7421, 7435, 7441, 7448, 7453, 7464, 7477, 7497, 7555, 7563, 7652, 7677, 7689, 7727, 7739, 7746, 7754.

Cement: with 2% gel, 10% salt and 1/4# flocele/sx. 3rd: 250 sx Class B cement with 2% D-79 and 1/4# flocele/sx tailed by 125 sx 50-50 pozmix with 2% gel, 10% salt and 1/4# flocele/sx.