Form C-104
Revised 10-1-78

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED MAR 28 86

DISTRIBUTION		
SANTA FE		
P.R.C.		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		
OTHER		

CURTIS J. LITTLE

Address: P. O. Box 1258, Farmington, NM 87499

Reason(s) for filing (Check proper box)

New Well	[X]	Change in Transporter of:	
Recompletion	[ ]	Oil [ ]	Dry Gas [ ]
Change in Ownership	[ ]	Casinghead Gas [ ]	Condensate [ ]

Other (Please explain)

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Schmitz	2-A	Ojito-Gallup-Dakota	State (Federal) or Fee	NM-03556

Location

Unit Letter __G__ : __1700__ Feet From The __North__ Line and __1850__ Feet From The __East__

Line of Section __16__ Township __25N__ Range __3W__ , NMPM. Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Giant Refining Company	P. O. Box 9156, Phoenix, AZ 85068
Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 1492, El Paso, TX 79978

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	16	25N	3W	No	Soon as Possible

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
10-6-85	1/27/86	8065'	8042'

Elevations (DF, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
7236 GR	Gallup-Dakota	7089'	7037'

Perforations 7968 - 8006 (20 holes) 7089,91,95,97,7114,22,24,26,28,30,32,39,48,50,59,65,71, 7228,32,38,54,56,68,74,84,89,7305,09,13,21,23,30,36,43,53,56,72,78,79,882. (40 holes).	Depth Casing Shoe 8062'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-¼"	9-5/8"	217'	106sx Class B (110CF)
8-3/4"	7"	6300'	1st stage-250sx 50-50poz tailin
	(w/50sx Class B (433CF). 2nd stage-160sx 65-35poz tailin w/50sx "B"		
6-1/4"	4-½"	8062'	210sx 50-50poz (348CF).

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 allowable for this depth or be for full 24 hours)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
1/27/86	3-24-86	Pump	

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	100 psig	100 psig	64/64

Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	16 bbls. oil	30 bbls (Frac H₂O)	32 MCF/D

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

Testing Method (Pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. 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 above is true and complete to the best of my knowledge and belief.

(Signature)

Operator
(Title)

March 27, 1986
(Date)

OIL CONSERVATION DIVISION

MAR 28 1986

APPROVED _____, 19__

BY Original Signed by FRANK T. CHAVEZ

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 multiple...