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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

APR 15 1988

Operator JEROME P. McHUGH		OIL CON. DIV. DIST. 3	
Address P O Box 809, Farmington, NM 87499			
Reason(s) for filing (Check proper box)		Other (Please explain)	
<input checked="" type="checkbox"/> New Well	Change in Transporter of:	CONFIDENTIAL  AMENDED	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas		
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate		

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Full Sail	Well No. 3	Pool Name, including Formation Gavilan Mancos	Kind of Lease State, Federal or Fee	Lease No. NM23039
Location Unit Letter <u>F</u> ; <u>1650</u> Feet From The <u>North</u> Line and <u>1850</u> Feet From The <u>West</u> Line of Section <u>29</u> Township <u>25N</u> Range <u>2W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

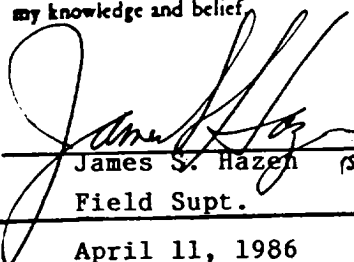
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining, Inc.	Address (Give address to which approved copy of this form is to be sent) P O Box 256, Farmington, NM, 87499	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Jerome P. McHugh	Address (Give address to which approved copy of this form is to be sent) P O Box 809, Farmington, NM, 87499	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 29
	Twp. 25N	Rge. 2W
Is gas actually connected?	When 4/4/86	

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

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

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

  
James S. Hazen (Signature)  
Field Supt.  
April 11, 1986 (Date)

OIL CONSERVATION DIVISION

APPROVED APR 09 1986  
Original Signed by FRANK T. CHAVEZ  
BY \_\_\_\_\_  
SUPERVISOR DISTRICT 3  
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 deviate 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 completed wells.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded 9-8-85	Date Compl. Ready to Prod. 11-1-85*		Total Depth 8080' KB			P.B.T.D. 8018' KB			
Elevations (DF, RKB, RT, CR, etc.) 7108' GL; 7120' KB	Name of Producing Formation Mancos		Top Oil/Gas Pay 6783'			Tubing Depth 7040'			
Perforations 6783-7028', 40 holes						Depth Casing Shoe 8041' KB			
<b>TUBING, CASING, AND CEMENTING RECORD</b>									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"		9-5/8"		275' KB		226 cf			
7-7/8"		5-1/2"		8041' KB		2776 cf in 3 stages			
		2-7/8"		7040' KB					

#### 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)

Date First New Oil Run To Tanks *11-1-85		Date of Test 3-16-86		Producing Method (Flow, pump, gas lift, etc.) Gas lift	
Length of Test 24	Tubing Pressure 210 psi		Casing Pressure 867 psi		Choke Size 22/32
Actual Prod. During Test	Oil - Bbls. 47 BOPD		Water - Bbls. 8 BWPD (frac only)		Gas - MCF 40 MCFGPD

#### GAS WELL

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