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DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator JACK A. COLE	Well API No.
Address P.O. BOX 191, FARMINGTON, NEW MEXICO 87499	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name RINCON	Well No. 11	Pool Name, Including Formation ESCRITO GALLUP	Kind of Lease FEDERAL State, Federal or Fee	Lease No. NM-58873
Location				
Unit Letter I : 1880 Feet From The SOUTH Line and 930 Feet From The EAST Line				
Section 31 Township 24N Range 6W, NMPM, RIO ARRIBA 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"/>	Address (Give address to which approved copy of this form is to be sent)	
GIANT REFINING COMPANY	P.O. BOX 256, FARMINGTON, NEW MEXICO 87499	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
COLE DEVELOPMENT COMPANY	P.O. BOX 191, FARMINGTON, NEW MEXICO 87499	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 31
	Twp. 24N	Rge. 6W
Is gas actually connected?	When ?	
YES	JULY 20, 1989	
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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 6-24-89	Date Compl. Ready to Prod. 7-18-89		Total Depth 5995		P.B.T.D. 5949			
Elevations (DF, RKB, RT, GR, etc.) 7089 GR	Name of Producing Formation GALLUP		Top Oil/Gas Pay 5650		Tubing Depth 5851			
Perforations 5650-58, 5778-99, 5822-24, 5830-32, 5846-56					Depth Casing Shoe 5992			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8 24.0 LB.		250		250 SKS. 295 FT.			
7 7/8	4 1/2 11.60 LB.		5992		650 SKS. 1358 FT.			
	2 3/8		5851					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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 Tank 7-26-89	Date of Test 8-2-89	Producing Method (Flow, pump, gas lift, etc.) FLOWING	
Length of Test 24 HOURS	Tubing Pressure 120	Casing Pressure 400	Choke Size 48/64
Actual Prod. During Test	Oil - Bbls. 28	Water - Bbls. 4 FRAC WATER	Gas - MCF 280

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate DIST. 3
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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
DEWAYNE BLANCETT, PRODUCTION SUPERINTENDENT
Printed Name
AUGUST 14, 1989
Date
(505) 325-1415
Telephone No.

OIL CONSERVATION DIVISION

Date Approved SEP 01 1989

By Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.