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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

B.K.

Operator Kenai Oil and Gas Inc.	
Address 717 17th Street, Suite 2000, Denver, Colorado 80202	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Name of Authorized Transporter of
Recompletion <input type="checkbox"/>	Casinghead gas
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico State	Well No. #1	Pool Name, Including Formation Nageezi-Gallup	Kind of Lease State, XXXXXXX	Lease No. L-2986
Location				
Unit Letter O	790	Feet From The South	Line and 1750	Feet From The East
Line of Section 32	Township 24N	Range 8W	NMPM, San Juan	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)			
Inland Corp.	P.O. Box 1528, Farmington, NM 87401			
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)			
Nageezi-Gallup Gas System	717 17th St., Ste. 2000, Denver, CO 80202			
If well produces oil or liquids, give location of tanks.	Unit O	Sec. 32	Twp. 24N	Rge. 8W
	Is gas actually connected?		When	
	Yes		5/20/81	

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5/15/79	Date Compl. Ready to Prod. 11/9/79		Total Depth 6521'KB		P.B.T.D. 5428'KB			
Elevations (DF, RKB, RT, GR, etc.) 7007'GR; 7019'KB	Name of Producing Formation Gallup		Top Oil/Gas Pay 5264-5383'		Tubing Depth 5292.20'KB			
Perforations 5264-5383'						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		295'KB		275 SXS.			
7-7/8"	4-1/2"		6520'KB		700 SXS			
Tbg:	2-3/8"		5392.20'KB					

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 Tanks 11/1/79	Date of Test 11/7/79	Producing Method (Flow, pump, gas lift, etc.) Swab and flow	
Length of Test 8 hrs	Tubing Pressure	Casing Pressure	Choke Size 2" open
Actual Prod. During Test	Oil-Bbls. 29	Water-Bbls. 19 (load)	Gas-MCF 83 est.

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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Joseph R. Mayfield
(Signature)
Vice President of Exploration
(Title)
May 22, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 20 1981, 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 multiply completed wells.