

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
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U.S.G.A.	
LAND OFFICE	
TRANSPORTATION	
OIL	
GAS	
CONSERVATION	
ADMINISTRATIVE	

OIL CONSERVATION DIVISION
P. O. BOX 2038
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. NAME OF OWNER OR OPERATOR OF WELL AND LEASE
Consolidated Oil & Gas, Inc.
P.O. Box 2038, Farmington, New Mexico 87499
Other (Please explain):
MAY 09 1985
OIL CON. DIV.
DIST. 3

II. TYPE OF WELL AND LEASE
Oil ☒ Gas ☐ Dry Gas ☐ Condensate ☐
III. LOCATION OF WELL AND LEASE
Well No. 3-E Pool Name, including Formation Tapacito Gallup ext.
Kind of Lease Jicarilla State, Federal or Fee Contr. 152
Section 8 Township 26N Range 5W NMPM Rio Arriba County

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Well Name JICARILLA Well No. 3-E Pool Name, including Formation Tapacito Gallup ext.
Kind of Lease Jicarilla State, Federal or Fee Contr. 152
Section 8 Township 26N Range 5W NMPM Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

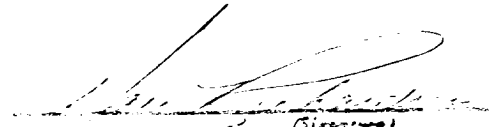
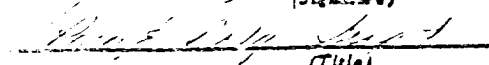
Name of Authorized Transporter of Oil or Condensate ☒ or Gas ☐
Giant Refining Co.
Address (Give address to which approved copy of this form is to be sent)
P.O. Box 256, Farmington, NM 87499
Name of Authorized Transporter of Gas ☐ or Dry Gas ☒
Northwest Pipeline Corp.
Address (Give address to which approved copy of this form is to be sent)
3539 E. 30th St., Farmington, NM 87401
Is well producing oil or liquids, give location of tanks. Unit F Sec. 8 Twp. 26N Rge. 5W
Is gas currently connected? No

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.


(Signature)

(Title)
5/3/85
(Date)

OIL CONSERVATION DIVISION
5-28-85 MAY 28 1985
APPROVED
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.

IV. COMPLETION DATA

Type of Completion - (X)	X	X		P.R.T.D.	Sack RTV. Diff. RTV.
8-20-84	11-22-84	8970!		7993! (PG) 8010! (CO)	
6936! RB - 6975! CR	T.airo Calles ext.	6936!		7397!	
7300! TC				3037!	
FUTING, CISING, AND GRINDING ROUNDS					
COLOR & FINISH SIZE				SACKS ON HAND	
15-1/2"	2-3/4"	318!		468 cf	
2-7/8"	7-5/8"	3830!		1178 cf	
5-1/2"	5-1/2" LITER	3680 "	337!	404 cf	440
	2-1/16" TEG	7397!			

V. TEST DATA AND REQUEST FOR AUTO-VALE (THIS
ONLY WILL
be after receipt of results of 1st and 2nd tests to equal to or exceed 100 after
100 data or 100 full 24 hours)

[illegible]

GAS WELL TEST DATE: 4-18-35

1014 MOED (127 MCF)	3 hours	53.44 BOED (6.68 bbls)	Quantity of Gas Produced
Back Pressure	993	1146	2 x 3/4"

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Consolidated Oil & Gas, Inc.

P.O. Box 2088, Farmington, New Mexico 87499

Owner (Please specify)

RECEIVED

MAY 09 1985

OIL CONSERVATION DIVISION

Full name of ownership give name
of all owners of previous owner

I. DESCRIPTION OF WELL AND LEASE

Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
JICARILLA	3-E Basin Dakota	Jicarilla	152
Unit	1800	Foot From The North	1700
Foot From The West			
Section	8	Township	26N
Range	5W	NMPU	Rio Arriba
County			

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)					
Giant Refining Co.	P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Condensed Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
Northwest Pipeline Corp.	3539 E. 30th Street., Farmington, N.M. 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected?	When
	F	8	26N	5W	No	

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.

5/3/85

(Date)

OIL CONSERVATION DIVISION

5-28-85
APPROVED

MAY 28 1985

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.

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Separate Forms C-104 must be filed for each pool in multiply completed wells.

10021 - 10031 17 refs

THIRD, CHARGES, AND COUNTERING RECORD

V. DATA AND REQUEST FOR ALLOWANCE (Total 10% after receipt of bid after 10% bid is equal to or more than 10% of the bid for the full 24 hours)

11-11-68

17-1	17-2	17-3	17-4	17-5	17-6	17-7	17-8	17-9	17-10	17-11	17-12	17-13	17-14	17-15	17-16	17-17	17-18	17-19	17-20	17-21	17-22	17-23	17-24	17-25	17-26	17-27	17-28	17-29	17-30	17-31	17-32	17-33	17-34	17-35	17-36	17-37	17-38	17-39	17-40	17-41	17-42	17-43	17-44	17-45	17-46	17-47	17-48	17-49	17-50	17-51	17-52	17-53	17-54	17-55	17-56	17-57	17-58	17-59	17-60	17-61	17-62	17-63	17-64	17-65	17-66	17-67	17-68	17-69	17-70	17-71	17-72	17-73	17-74	17-75	17-76	17-77	17-78	17-79	17-80	17-81	17-82	17-83	17-84	17-85	17-86	17-87	17-88	17-89	17-90	17-91	17-92	17-93	17-94	17-95	17-96	17-97	17-98	17-99	17-100
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1. The name of the person or organization that is the subject of the report. 2. The date of the report. 3. The name of the person or organization that is the source of the information. 4. The name of the person or organization that is the recipient of the information. 5. The name of the person or organization that is the sponsor of the report. 6. The name of the person or organization that is the publisher of the report. 7. The name of the person or organization that is the distributor of the report. 8. The name of the person or organization that is the printer of the report. 9. The name of the person or organization that is the binder of the report. 10. The name of the person or organization that is the cover of the report.

FILE TEST DATE: 4-25-85

5 HCFD (81 HCF)	Length of Test 3 hours	272 ECFD (34 bbls)	Quantity of Gas 1
272 ECFD (34 bbls)	Flow Pressure (at well)	Flow Pressure (at well)	Flow Rate
Flow Pressure 1352	Pkr	2 x 3/4"	