

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CON. DIV
OIL CONSERVATION DIVISION DIST. 3
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

SEP 25 1987

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Hixon Development Company	
Address P.O. Box 2810, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <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 Marsha Bingham	Well No. 1	Pool Name, including Formation NE Ojito Gallup	Kind of Lease State, Federal or Fee Jicarilla	Lease No. 117
Location Unit Letter <u>A</u> ; <u>450</u> Feet From The <u>N</u> Line and <u>440</u> Feet From The <u>E</u> Line of Section <u>27</u> Township <u>26N</u> Range <u>3W</u> , 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"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) 606 US Hwy 64, Bloomfield, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	A 27 26 3 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.

Bruce E. Delventhal

Bruce E. Delventhal (Signature)

Petroleum Engineer

(Title)

September 25, 1987

(Date)

OIL CONSERVATION DIVISION

SEP 25 1987

APPROVED _____, 19 _____

BY ORIGINAL SIGNED BY ERNIE BUSCH

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #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.

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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 6-27-87	Date Compl. Ready to Prod. 8-31-87		Total Depth 8480' KB		P.B.T.D. 8425' KB				
Elevations (DF, RKB, RT, GR, etc.) 7464' GR	Name of Producing Formation NE Ojito Gallup		Top Oil/Gas Pay 7322' KB		Tubing Depth 7051' KB				
Perforations 7090' - 7158', 7160' - 7210', 7212' - 7348', 7350' - 7394', 7396' - 7452', 7454' - 7590', and 7594' - 7650'						Depth Casing Shoe 8468' KB			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"		8 5/8"		336 KB		See below			
8 3/4"		5 1/2"		8468 KB		See below			
		2 7/8"		7051' 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 8-31-87	Date of Test 9-20-87	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 220 psig	Casing Pressure 400 psig	Choke Size 3/4"
Actual Prod. During Test	Oil - Bbls. 170	Water - Bbls. 0	Gas - MCF 566

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

Cementing Record:

8 5/8" - 225 sks (265 cu. ft.) Class "B" cement containing
2% CaCl₂ and 1/4#/sk Cellophane flakes.

5 1/2" - 1st Stage - 540 sks (734 cu. ft.) of 50:50 Pozmix
containing 2% gel, 0.75% Halad 322, and 12.5#/sk
gilsonite.

2nd Stage - 400 sks (1548 cu. ft.) of Class "B"
cement containing 3% Econolite and 1/4#/sk Flocele.
Tailed in with 50 sks (59.0 cu. ft.) Class "B"
cement containing 1/4#/sk Flocele.