Submit 5 Copies
Appropriate District Office
DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III	Santa Po	e, New Mo	xico 87504-208	88				
000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR A	LLOWAE	LE AND AUTH	IORIZAT	ION			
•	TO TRANSP	ORT OIL	AND NATURA	AL GAS				
Operator Giant Exploration & 1		Well Al-	PI No. 045-28328					
Address			<u> </u>		1			
P.O. Box 2810, Farmin Reason(s) for Filing (Check proper box)	ngton, N.M. 874	99	Other (Plan	se explain) -		a NAJA O	11/10/	10000
New Well	Change in Transp	corter of:	Outer (1 real		1 en		20 Th	Soule for
Recompletion	Oil Dry G	325 🔲 7	exite es	10 Sen	2/	5 1921 192 -	4 AC	: ney w
change of operator give name and address of previous operator			- percer		-6/			
-	ANDIDACE							•
I. DESCRIPTION OF WELL A	Well No. Pool 1	Name Includi	ne Formation	······································	Kind of	1 case	1 162	sc No.
Bisti Coal 8 Com	1		tland Coal		State, Fe	ederal or Fee	SF 078	
Location			··		T- Fed	leral	I	
Unit LetterG	:Fcct I	rom The No	orth Line and _	1850	Fcct	From The	East ·	Line
Section 8 Township	, 25N Range	120	, NMPM,	San	Juan			County
II. DESIGNATION OF TRANS	יג זור פר מפדמרופ	וו זייר אנא רווא	DAT CAS					
Name of Authorized Transporter of Oil	or Condensate	TAN ION	Address (Give address	ss to which a	pproved c	opy of this form	is to be sent	·)
·	L		·		••			•
Name of Authorized Transporter of Casing	head Gas or Dr.	y Gas XX	Address (Give addres	s to which a	pproved c	opy of this form	is to be sen	')
Giant Exploration & Production Co.				mingto	on, N.M. 87499			
f well produces oil or liquids, ive location of tanks.	Unit Sec. Twp.		Is gas actually connec	acd?	When?			•
	<u> </u>		No No	 	l			
this production is commingled with that f V. COMPLETION DATA	rom any other lease or pool, g	ive commingi	ng order number:					
T. COM BETTON BATA	Oil Well	Gas Well	New Well Work	over D	ecpen	Plug Back Sa	me Res'v	Diff Res'v
Designate Type of Completion -		X	X		- Popul			
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		L
11-14-90	6-21-91		1260'			1206.7	741	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
184' GLE Basal Fruitland Coal		1091'			Depth Casing Shoe			
1091' - 1114'					ì	Dejan Casing 5	1100	
1091 - 1114	TURING CAS	ING AND	CEMENTING RE	CORD				
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
8-3/4"	7"		131.95'			60 sks.		
6-1/4"	4-1/2"		1212.89'			140 sks.		
	1-1/2"		1108'					
. TEST DATA AND REQUES								
OIL WELL (Test must be after re Date First New Oil Run To Tank	covery of total volume of load					tepth or be for	ull 24 hours.)
Mic 1418 New Oil Ruil 10 1408	Date of Test		Producing Method (F.	row, przeb, 8	ω iyi, a	DEU	FIA	
ength of Test	Tubing Pressure	4. 🖓	Casing Pressure			hoke Size		世
		÷ N =	(BBS 51912)		1	JUL:	7 1991	
Actual Prod. During Test	Oil - Bbls.		Water-Bbls.	įV.	(GAS- MCF O!L C		
	<u></u>	المريا	<u>h. </u>			<u> </u>	IST. 3	
GAS WELL	The second second		Bbls. Condensate/MN	/CC		Gravity of Con		
Actual Prod. Test - MCF/D 503	Length of Test 24 hrs		Bols. Concensate/Min	.C.1.		N/A	تنفحين	
osting Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size		
component thurst acres by A	130 psi		130 ps:			3/4'	1	
VI. OPERATOR CERTIFIC		NCE			L			
	OIL (CONSE	ERVA	TION D	IVISIOI	N		
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.					<u>.</u>	ind 10 17 11.	. j V	
			Date Approved					
			Dato 1, pp 10104					

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

Signature John C.

Printed Name

Corbett

1991

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

By_

ORIGINAL SIGNED BY ERNIE BUSCH

CHEVEY ON A GAS HISPERION, DIST. 43

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Executive Vice President

Telephone No.

3) Fill out only Sections I. II. III. and VI for changes of operator, well name or number, transporter, or other such changes.