STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

TO I WAG (AIRIAS)	TALE	J = F -	454 11
20. 20 CP0149 944	-	-	
DISTRIBUTION			
SANTA PE		П	
FILE		1	
V.S.G.S.			
LAND OFFICE			
TRAMSPORTER	016		
	GAS		
OPERATOR			
PRORATION OF	ICZ		

OIL CONSERVATION DIVISION P. O. BOX 2088

ŀ	FILE	SANTA FE. N	SANTA FE, NEW MEXICO 87501			
	U.S.G.A.					
<u> </u>	TRANSPORTER OIL REQUEST FOR ALLOWABLE					
<u> </u>	GAS	AND				
1.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
Γ	Cperdice					
L	Caulki Address	ns Oil Company				
	P.O.	Box 780 Farmington, New Me	07/00			
h	eason(s) for filing (Check prop	box;	Other (Please explain			
	A A-II XX	Change in Transporter of:	- 1. tease gaptar	-,		
- 1	ecompletion		Gas.			
Γ,	hange in Ownership	Costneheat Gas Cos	ndensate			
If	change of ownership give ne	ne ·	•			
-	nd eddress of previous owner					
11. <u>D</u>	ESCRIPTION OF WELL A	ND LEASE				
	Breech	Well No. Pool Name, including	1	Legse No		
-	ocation	81anco M	esa Verde _ State,	Federal or Fee Federal NM 0373		
	Unit Letter H	980 Fast	1610			
	· ·	Peer Free Ins. Last	ine cod 1618 Feet	From The North		
	Line of Section 24	Township 26 North Range	7 West , NMPM.	Rio Arriba County		
t ni						
א	control Authorized Transporter o	ORTER OF OIL AND NATURAL (approved copy of this form is to be sent)		
	Giant Refinery C		i	·		
74	eme of Authorized Transporter of	Consequent Gas or Dry Gas	P.O. Box 256 Farmin	eton. New Mexico		
_	Gas Company of N		1508 Pacific Ave. D	•		
	well produces oil or liquide, we location of tanks.	Unit Sec. Twp. Res.	is que actually connected?	When		
<u> </u>		H 24 26N 7W	No No	l		
L CC	his production is commingled MPLETION DATA	with that from any other lease or pool	, give commingling order number			
	Designate Type of Comple	CIL Well Gas Well	New Well Workover Deepe	e. Plug Back Same Res'v. Diff. Res's		
		X	X			
De	8-19-84	Date Compl. Ready to Prod.	Total Depth:	P.3.T.D.		
Ē1.	0-19-84 WELLOSS (DF, RKB, RT, GR, etc	10-11-84 Name of Producing Formation	Top CIL/Gas Pay	68351		
	6149 Gr	Mesa Verde	4008	Tuhing Depth.		
1 . –	rigrations			4768		
	4784 ¹ ,4754 ¹ ,4740 ¹ ,47	32',4714',4695',4691',467 <u>'</u>	5'.4636'.4633'.4582'.4	68351		
-		TUBING, CASING, AN	D CEMENTING RECORD			
-	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
 	7 7/8"	9 5/8" 5 1/2"	711'	450 sacks (531 Cu.Ft.)		
		1 1/4"	4768'	1300 sacks(2004 Cu.Ft.)		
	ST DATA AND REQUEST	FOR ALLOWABLE (Test must be	ufter recovery of total volume of load	all and must be equal to ar exceed top allow		
	, WELL OFIRST New Cill Prop To Tonks.	Date of Test	Producing leathon [Flow photo]	C R		
				V"(5 1		
Len	gth of Teet	Tuhing Pressure	Casing Presente	Cabbellise		
			OCT 2 4 19	84		
Aett	ist Pros. During Test	CII-Bhis.	Wester-Bhia-OIL CON.	C-MCF		
			DIST. 3	DIV.		
	WELL		DIS1. 3			
Acti	al Prot. Test-MCF/D	Langth of Test-	Bhis. Condensete/MMCF	Gravity of Condensate		
	680	3 Hours				
7 401	Back Pressure	Tubing Pressure (Shut-in) 1164	Cosing Pressure (Shub-Lib)	Choke Size		
	TIFICATE OF COMPLIAN		1161	3/4"		
LER	TIPICALE OF CUMPLIA	ICE	OIL CONSERV	ATION DIVISION		
hen	eby certify that the rules and	regulations of the Cil Conservation	APPROVED	OCT 24 1984		
Divis	ision have been compiled with and that the information given we is true and complete to the best of my knowledge and belief.		Original Signed by FRANK T. CHAVEZ			
	is the man templete to the	se seek of my knowledge and peliar.	BY	SUPERVISOR DISTRICT # 3		
	Charles Verguer		TITLE This form is to be filed in compliance with RULE 1104.			
	Mailes Clery	· cell	If this is a request for all	lowable for a newly drilled or deepened		
	Superintendent		well, this form must be accompanied by a tabulation of the deviation teets 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.			
		itie)				
	10 ·18-84		Fill out only Sections L. H. HL and VI for changes of owner,			
		ate)	well name or number, or transp	orten or other such change of condition.		
			Separate Forms C-104 m	ust be filed for each pool in multiply		
		,,				