

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. OPERATOR	
S.E.R.H., Inc.	
Address Box 312, Otis, Kansas 67565	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Petroleum Energy, Inc.

II. DESCRIPTION OF WELL AND LEASE				
Lease Name Navajo 5	Well No. 2	Pool Name, including Formation Undesignated Organ Rock (Gas)	Kind of Lease XXXX Federal XXXX	Lease No. N00-C-14-20-4157
Location				
Unit Letter L	1980	Feet From The South	Line and 660	Feet From The West
Line of Section 5	Township 26N	Range 19W	, NMPM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
Giant Refining Company		Box 256, Farmington, New Mexico 87499		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
S.E.R.H., Inc.		Box 312, Otis, Kansas 67565		
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 5	Twp. 26N	Rge. 19W
Is gas actually connected?		When		
Yes		7/8/85		

IV. COMPLETION DATA				
Designate Type of Completion - (X)				
Date Spudded 2/18/85	Date Compl. Ready to Prod. 3/25/85	Total Depth 6300	P.B.T.D. 6180	
Elevations (D <sub>1</sub> , RT, GR, etc.) 6007 KB	Name of Producing Formation Organ Rock	Top Oil/Gas Pay 3853	Tubing Depth 3950	
Perforations 3853-55, 3862-64, 3870-76, 3898-3904, 3916-24. (48 holes)			Depth Casing Shoe 6240	

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/4	13 3/8	100	153 cu ft
12 1/4	9 5/8	1491	472 cu ft
8 3/4 * Tapered	7 *	0-4140	1st stg. 396 cu ft
8 3/4 String	4 1/2 *	4140-6240	2 nd stg 649 cu ft

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 XXXXXXX 1 1/2" Tubing set @ 3950'	Date of Test XXXXXXXXXX	Producing Method (Flow, pump, gas lift, etc.) XX	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D 445 Mcf	Length of Test 24 hours	Bbls. Condensate/MMCF 0	Dist. 3
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 1396	Casing Pressure (shut-in)	Choke Size 12/64"

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	
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.		APPROVED _____ Original Signed by CHARLES GHOLSON BY _____ TITLE _____ DEPUTY OIL & GAS INSPECTOR, DIST. #2	
Agent (Signature) July 26, 1985 (Date)		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 Form C-104 must be filed for each pool in multiple completed wells.	