

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and
Effective 1-1-65

DATE RECEIVED	
LOCATION	
WELL	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator Hicks Oil & Gas, Inc.

Address P.O. Drawer 3307 - Farmington, New Mexico 87499

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of: Oil ☒ Dry Gas ☐ Effective Date July 1st, 1985

Recompletion ☐ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
<u>Southeast Cha Cha Unit</u>	<u>34</u>	<u>Cha Cha Gallup</u>	State, Federal or Fee <u>Federal NM</u>	<u>09979</u>
Location				
Unit Letter <u>F</u>	<u>1980'</u> Feet From The <u>North</u> Line and <u>1980'</u> Feet From The <u>West</u>			
Line of Section <u>22</u>	Township <u>28N</u>	Range <u>13W</u>	NMPM, <u>San Juan</u>	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"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Encos Corporation</u>	<u>P.O. Box 1320 - Farmington, New Mexico 87499</u>
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? Area

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't	Diff. Res't
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B. T.D.					
Depth to Oil/Gas Pay, or, etc.	Name of Producing Formation	Top Oil/Gas Pay	Casing Depth					
Depth to Gas	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

CASING & TUBING SIZE	DEPTH SET	BACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of gas or oil produced in excess of 100 bbl. for this depth or be for full 24 hours)

Test Method (Flow, Shut-in, etc.)	Producing Method (Flow, Shut-in, etc.)
Test Pressure	Tubing Pressure
Casing Pressure	Shut-in Pressure
Water-Bbls.	Shut-in Pressure (Shut-in)
Shut-in Pressure (Shut-in)	Casing Pressure (Shut-in)

V. SIGNATURE OF OPERATOR

I, Hicks Oil & Gas, Inc., certify that the data and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

President

OIL CONSERVATION COMMISSION

APPROVED Frank J. [Signature] JUN 24 1985
BY [Signature]
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with NML 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 NML 1104.

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 multiple completed wells.