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Appropriate District Office
DISTRICT |
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III

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

Santa Fe, New Mexico 87504-2088

the first manner touch - mand time or the	REQUES	HUH A	OBT OIL A	/AND 1 CINA	NATURA	JINIZA LIGAS					
TO TRANSPORT OIL AND NATURAL							Well Art No.				
BHP PETROLEUM (AMERICAS) INC.					3004526105						
P.O. BOX 977 FARMIN	GTON NM	87499									
son(s) for Filing (Check proper box)					Other (Please	e explain)				
v Well	Char	ige in Trans									
	Oil	Dry			TRAN.	CHANG	E ONLY				
inge in Operator	Casinghead Gas	Cone	lensate 📗								
nange of operator give name address of previous operator									.,		
DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including					- Formation K			Sind of Lease No.			
ase Name				ICTURED CLIFF				State, Federal or Fee SF 078904			
GALLEGOS CANYON UNIT	[34	3 IML	JI KUIL I	1010	KED OLI	<u> </u>					
Unit LetterA	. 930'	Fed	From The FN	łL	_ Line and	1050'	Fee	From The	FEL	Line	
Section 26 Township	28N	Ran	Re 12W		, NMPM,	SAN	JUAN			County	
		NE OU	ND NATED	DAL C	245						
I. DESIGNATION OF TRANS 1 mm of Authorized Transporter of Oil	Orukiek (Ondensale	יייין ערוג	Address	(Give addre	ss to whi	ch approved	copy of this for	m is to be se	ય)	
					101-11		ch annual	copy of this for	m is to he se	nt)	
ame of Authorized Transporter of Casing	_	or	Dry Gas 🏋		Give addre				499	•	
HP PETROLEUM (AMERICAS		ı Tw	- 1 Bac		ROY A		When		132		
f well produces oil or liquids, ive location of tanks.	Umukt Sex		r ****		YES		i	2-6-8	37		
this production is commingled with that i	imm any other is	ease or mod	, give comminel	ing orde							
this production is comminged with that it. V. COMPLETION DATA	nom my outer i	o. poo	, <u></u>								
Designate Type of Completion		XI Well	Gas Well	New	Well Worl	tover	Deepen	Plug Back	Same Resiv	Diff Res'v	
ate Spudded	Date Compl. I	Ready to Pri	xd.	Total			l	P.B.T.D.	67'		
12-02-84		1-03-85			1732'						
levations (DF, RKB, RT, GR, etc.) 5806 'GR 5814 'KB	Name of Prod	Name of Producing Formation PICTURED CLIFFS			Top Oli/Cas Psy 1621 '			Tubing Depth 1646'			
Perforations									Depth Casing Shoo 1706		
1621-1628 1 JSPF 1	639-1644							11			
	TU	BING, C	ASING AND	CEM	ENTING P	ECOR	D		ACKE CEL	IENT	
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT 1005k(118ft3)class B			
124"	8	5/8"			130			2%CaCl	· ¼#/sk	Flocele	
		11		┨—	1706			250sk(315ft3)	50-50 p	
61411	41/2	·		┨	1646			2%gel.	.5%cfr-	10 ¼#/sk	
		3/8"	. 	<u> </u>	1040		·····	1-7-2		Floce	
V. TEST DATA AND REQUE OIL WELL (Test must be after	21 LOK VI	ALUWAI) Li Ci Jood oil and mu	n he eau	al to or exce	ed top all	owable for th	is depth or be	for full 24 ho	ws.)	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test	, waterne of	IVAN OR GIVE MAD	Prode	cing Method	(Flow, p	ump, gas lift,	etc.)			
Length of Test	Tubing Pressure			Casis	Casing Pressure				BIV	FIN	
recitan on 1 car	troing ties	Oil - Bbla.			Water - Bbls.			APR1 7 1990			
Actual Prod. During Test	Oil - Bbls.										
GAS WELL								alt, C	_	Dù	
Actual Prod. Test - MCF/D	Length of To			Bble	. Condensate/	MMCF		1 .	MST "		
415	1	24			Casing Pressure (Shut-in)			Choke Siz			
Testing Method (pilot, back pr.) FLOWING	Tubing Pres	Tubing Pressure (Shut-in) 130			215			3/8"			
VI. OPERATOR CERTIFI					Oll	CC	NSFR\	/ATION	DIVIS	ION	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION APR 1 7 1990						
is true and complete to the best of m	y knowledge an	d belief.			Date A	pprov	ed	HPK 17	וסטט		
JRED LOWUM					D.		3	d	2	- 	
Signature .					SUPERVISOR DISTRICT #3						
Fred Lowery Uperations Supt. Printed Name 04-16-90 327-1639					Title		SUPER	VISUR DI	STHICT	13	
04-16-90				_	1 III						
Dive		Tele	phone No.								

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

