

Discharge II

PO Drive

District II

Plasma IV

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State of New Mexico
Energy, Minerals & Natural Resources Department

PO Box 2088

Santa Fe, NM 87504-2088

July 10 1994

Instructions on back

Appropriate District Office

5 Copies

3 copies

RECOMMENDED REPORT:

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

ROBERT L BAYLESS PO BOX 168 FARMINGTON, NM 87499		1 OGRID Number 019418	
1 API Number 30 - 0 45-26130		1 Reason for Filing Code RC	
1 Pool Name Pinon Gallup		1 Pool Code 50380	
1 Property Code 001871		1 Property Name TL Rhodes B	
1 Well Number 1E			

UI or lot no.	Section	Township
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UI or lot no.	Section	Township	Range	Lot/Ida	Feet from the	North/South Line	Feet from the	East/West Line	County
M	20	28N	11W		790	South	1160	West	San Juan

¹¹ Bottom Hole Location

4. no.	Section	Township	Range
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UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
" Lee Code	" Producing Method Code	" Gas Connection Date		" C-129 Permit Number		" C-129 Effective Date		" C-129 Expiration Date	

III. Oil and Gas Transporters

"Transporter	"Tran
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" Transporter OGRID	" Transporter Name and Address	" POD	" O/G	" POD ULSTR Location and Description
007057	El Paso Natural Gas Company PO Box 4990 Farmington, NM 87499	0531610	G	M-20-28N-11W
009018	GIANT Refinery 5764 US HWY 64 Farmington, NM 87499	0531630	O	M-20-28N-11W

IV. Produced Water

POD

POD 0531650	M-20-28N-11W	POD ULSTR Location and Description
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V. Well Completion Data

" Spud Date	
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" Spud Date 12-14-85	" Ready Date 3-21-97	" TD 6323'	" PBDT 5975' BP	" Perforations 5642-5662'
" Hole Size	" Casing/Tubing Size	" Depth Set	" Sacks Cement	
12 1/4"	9 5/8"	310'	330 cu ft.	
8 3/4"	7"	6323'	1-512 cf class B65"35	
			Poz. tailed in w/472	
	2 3/8" Tubing	5689' Tubing D. Set	cf class B Neat, 2-135	

VI. Well Test Data- 65:35 Poz.

1. Date New Oil 2. Date New Oil	3. Date New Oil 4. Date New Oil
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" Date New Oil 3/21/97	" Gas Delivery Date 3/21/97	" Test Date 3/21/97	" Test Length NO FLOW	" Tbg. Pressure	" Csg. Pressure
" Choke Size	" Oil 3.5 BPD	" Water	" Gas NO FLOW	" AOF	" Test Method
" I hereby certify that the rules of the Oil Consumption District have been followed.					

with and that the information given above is true and complete to the best of my knowledge and belief.

Signature.

Title: _____

Date: 5-1-97

21/11/11

OCBIP

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Approved by:

 Appointed Date.

Previous Operator Signature

Printed Name _____

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