## --. -- (----- ------DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE OIL IRANSPORTER OPERATOR PRORATION OFFICE Uperator

Reason(s) for filing (Check proper box)

Address

Recompletion

Change in Ownership

BHP Petroleum (Americas), Inc.

011

P.O. Box 3280; Casper, WY

## NEW MEXICO OIL CONSERVATION CO REQUEST FOR ALLOWABL AND

AUTHORIZATION TO TRANSPORT OIL AN

82602

Dry Gas

Change in Transporter of:

Casinghead Gas

| ON COMMISSION  | Form C-104 Supersedes Old C-104 and C-111   |
|--|---|
| OIL AND NATURA   | AL GAS  |
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| her (Please explain)   |   |
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| Kind of  | 25020 110.  |
| iffs State, F  | ederal or Fee Federal SF078905  |
| 60 Feet F  | rom The East  |
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| , ммрм, S  | an Juan County  |
| e address to which   | approved copy of this form is to be sent)   |
|  |   |
|  | approved capy of this form is to be sent)   |
| D ~ ** 9900 .  |   |
| BOX 3280:  | Caspr. WY 82602   |
| lly connected?   | when 1-2-86   |
| lly connected?   | when 1-2-86   |
| lly connected? S gling order number  | 1-2-86 .  |
| S gling order number   | 1-2-86 .  |
| gling order number   | Plug Bacx   Same Res'v.   Diff. Res'v.   P.B.T.D.   1525  |
| Sily connected? Silver in the connected? Workover in the connected? Silver in the connected?   | 1-2-86  |
| S gling order number Workover Deepe  | 1-2-86  |
| gling order number  Workover Deepe   | 1-2-86  |
| gling order number  Workover Deepe  Pay  RG RECORD  DEPTH SET  | Plug Bacx   Same Res'v. Diff. Res'v.  P.B.T.D.  1525 Tubing Depth 1523 Depth Casing Shoe 1540  SACKS CEMENT   |
| gling order number  Workover Deepe   | Plug Bacx   Same Res'v. Diff. Res'v.  P.B.T.D.  1525 Tubing Depth  1523 Depth Casing Shoe  1540  SACKS CEMENT  100 SXC1 R w/2%CaCl2&  |
| Ily connected?  S  gling order number  Workover Deepe  Pay  8  RG RECORD  DEPTH SET  135   | Plug Back   Same Res'r.   Diff. Res'v.     P.B.T.D.   1525     Tubing Depth   1523     Depth Casing Shoe   1540     SACKS CEMENT   100   sxCl   R   w/2%CaCl2%   1/4#/ sx   Flocele     275   sx   50-50Pozmix   w/2%   |
| gling order number  Workover Deepe  Pay  RG RECORD  DEPTH SET  135  1540  1523   | 1-2-86     1-2-86   |
| gling order number  Workover Deepe  Pay  R  R  R  R  R  R  R  R  R  R  R  R  R   | 1-2-86  |
| gling order number  Workover Deepe  Workover Deepe  Barrier Deepe  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   | 1-2-86  |
| ally connected?  S  Agling order number  Workover Deepe  S  S  S  S  S  S  S  S  S  S  S  S  S   | Plug Bacx   Same Res'v. Ditt. Res'v.  P.B.T.D.  1525 Tubing Depth  1523 Depth Casing Shoe  1540  SACKS CEMENT  100 SXC1 R w/2%CaCl2&  1/4#/SX Flocele  275 SX 50-50Pozmix w/2%  0.5%TF04, ½#/SX Celloflak and oil and must be equal to or exceed top allow  gas lift, etc.)   |
| ally connected?  S  Agling order number  Workover Deepe  Book Deepe  Book Deepe  135  1540  1523  of total volume of load full 24 hours)  Method (Flow, pump.  | Plug Bacx   Same Res'v. Diff. Res'v.  P.B.T.D.  1525 Tubing Depth  1523 Depth Casing Shoe  1540  SACKS CEMENT  100 sxCl B w/2%CaCl2%  1/4#/ sx Flocele  275 sx 50-50Pozmix w/2%  0.5%TF04.½#/sx Celloflaked oil and must be equal to or exceed top allow gas lift. etc.)  Choke Size  11 Choke Size  11 Choke Size  11 Choke Size |
| S silly connected?  S sill | Plug Back   Same Res'v. Diff. Res'v.  P.B.T.D.  1525 Tubing Depth  1523 Depth Casing Shoe 1540  SACKS CEMENT  100 sxCl R w/2%CaCl2& 1/4#/sx Flocele 275 sx 50-50Pozmix w/2% 0.5%TF04.½#/sx Celloflaked oil and must be equal to or exceed top allow gas lift, etc.)  Choke Size  [Mil 2 1 1336]  Gas-MCF                          |
| S silly connected?  S sill | Plug Back   Same Res'v. Ditt. Res'v.  P.B.T.D.  1525 Tubing Depth  1523 Depth Casing Shoe 1540  SACKS CEMENT  100 sxCl R w/2%CaCl2% 1/4#/ sx Flocele  275 sx 50-50Pozmix w/2% 0.5%TF04.½#/sx Celloflak and oil and must be equal to or exceed top allow  [as lift, etc.]  Choke Size  [All 2 1 1336]                              |
| gling order number  Worzover Deepe  Pay  RECORD  DEPTH SET  135  1540  1523  of rotal volume of load (Flow, pump.)  Retnod (Flow, pump.)   | Plug Back   Same Res'v. Diff. Res'v.  P.B.T.D.  1525 Tubing Depth  1523 Depth Casing Shoe 1540  SACKS CEMENT  100 sxCl R w/2%CaCl2& 1/4#/sx Flocele 275 sx 50-50Pozmix w/2% 0.5%TF04.½#/sx Celloflaked oil and must be equal to or exceed top allow gas lift, etc.)  Choke Size  [Mil 2 1 1336]  Gas-MCF                          |
| S silly connected? S silly connected silly conn | Plug Back   Same Res'v.   Ditt. Res'v.   P.B.T.D.   1525   Tubing Depth   1523   Depth Casing Shoe   1540    SACKS CEMENT   100 sxCl B w/2%CaCl2&   1/4#/ sx Flocele.   275 sx 50-50Pozmix w/2%   0.5%TF04. ½#/sx Celloflak and oil and must be equal to or exceed top allow gas lift. etc.)    Choke Size                        |
| ally connected?  S  Agling order number  Workover Deepe  Workover Deepee  Workover | Plug Back   Same Res'v.   Diff. Res'v.    P.B.T.D.   1525   Tubing Depth   1523   Depth Casing Shoe   1540    SACKS CEMENT   100   sx Cl R   w/2% Ca Cl 2%   1/4# / sx Flocele   275   sx 50-50 Pozmix   w/2%   0.5% TF04, ½ # / sx Celloflake and oil and must be equal to or exceed top allow gas lift, erc.)    Choke Size     |
| S silly connected?  S silly connected.  S sill | Plug Bacx   Same Res'v. Ditt. Res'v.  P.B.T.D.  1525 Tubing Depth  1523 Depth Casing Shoe 1540  SACKS CEMENT 100 SXC1 R w/2%CaCl2% 1/4#/SX Flocele 275 SX 50-50Pozmix w/2% 0.5%TF04, ½#/SX Celloflaked oil and must be equal to or exceed top allow gas lift. etc.)  Choke Size  NA  Choke Size  3/8  RVATION COMMISSION          |
| gling order number  Workover Deepe  Workover Deepe  RECORD  DEPTH SET  135  1540  1523  Of total volume of load (ull 24 hours)  Wetnod (Flow, pump, order)  Workover Deepee  Insate/MMCF  One of the order  One of | Plug Back   Same Res'v.   Diff. Res'v.    P.B.T.D.   1525   Tubing Depth   1523   Depth Casing Shoe   1540    SACKS CEMENT   100   sx Cl R   w/2% Ca Cl 2%   1/4# / sx Flocele   275   sx 50-50 Pozmix   w/2%   0.5% TF04, ½ # / sx Celloflake and oil and must be equal to or exceed top allow gas lift, erc.)    Choke Size     |
| Pay  B  G RECORD  DEPTH SET  135  1540  1523  f total volume of locall 24 hours) etnod (Flow, pump, sure)  Bure  OIL CONSE   | Plug Bacx   Same Res'v. Ditt. Res'v.  P.B.T.D.  1525 Tubing Depth  1523 Depth Casing Shoe 1540  SACKS CEMENT 100 SXC1 R w/2%CaCl2% 1/4#/SX Flocele 275 SX 50-50Pozmix w/2% 0.5%TF04, ½#/SX Celloflaked oil and must be equal to or exceed top allow gas lift. etc.)  Choke Size  NA  Choke Size  3/8  RVATION COMMISSION          |

| If change of ownership give name and address of previous owner    |  | ·.   |                      |                             |                   |
|---|--|--|----------------------|-----------------------------|-------------------|
| DESCRIPTION OF WELL AND   |  |  |                      |                             | _                 |
| Callana Cart  | Well No. Pool Name, Including F  |  | Kind of Lease        |                             | Lease No.         |
| Gallegos Canyon Unit  | 353   West Kutz-Pic  | tured Cliffs   | State, Federal of    | Federal                     | SF078905          |
| Location I 1/   | 170 South  | 1000   |                      | <b></b>                     | į                 |
| Unit Letter 1 : 14  | 170 Feet From The South Lin  | • and  | Feet From The        | . East                      |                   |
| Line of Section 22 Tox  | mahlo 28N Range  | 12W , NMPN   | . San Ju             | ıan                         | County            |
| DESIGNATION OF TRANSPORT  | TER OF OIL AND NATURAL GA  | c  |                      |                             |                   |
| Name of Authorized Transporter of Oil                             |  | Address (Give address                                      | to which approved    | copy of this form is        | to be sent)       |
|   | _  |  |                      |                             | ŕ                 |
| Name of Authorized Transporter of Cas                             | singhead Gas or Dry Gas X  | Address (Give address                                      | to which approved    | capy of this form is        | to be sent)       |
| BHP Petroleum (Ame  | ericas). Inc.  | P.O. Box 32  | 280 - Casni          | c. WY 8260                  | ,                 |
| If well produces oil or liquids,                                  | Unit Sec. Twp. P.ge.   | is gas actually connect                                    | ed? When             |                             | <del></del>       |
| give location of tanks.   | 1 1 ,  | Yes  | ŧ j                  | 1-2-86                      |                   |
|   | th that from any other lease or pool,  | give commingling orde                                      | r number:            |                             |                   |
| COMPLETION DATA   | Oil Well Gas well  | New Well Workover  | Deepen               | Plug Back   Same Re         | s'v. Diff. Res'v. |
| Designate Type of Completion                                      | on = (X)   | X  |                      | t<br>I                      | 1                 |
| Date Spudded  | Date Compt. Reday to Prod.   | Total Deptn  |                      | P.B.T.D.                    |                   |
| 7-8-85  | 8-20-85  | 1540   |                      | 1525                        |                   |
| Elevations (DF, RKB, RT, GR, etc.)                                | Name of Producing Formation  | Top CU/Gas Pay   |                      | Tubing Depth                |                   |
| GR-5693, KB- <u>5701</u>  | Pictured Cliffs  | 1498   |                      | 1523                        |                   |
| Perforations  |  |  |                      | Depth Casing Shoe           |                   |
| 1498-1513 16 perfs  |  |  |                      | 1540                        |                   |
|   | TUBING, CASING, AND  | CEMENTING RECO   | ₹D                   |                             |                   |
| HOLE SIZE   | CASING & TUBING SIZE   | DEPTHS   | ET                   | SACKS CE                    | MENT              |
| 12 1/4  | 8 5/8  | 135  | 1                    | 00 sxCl B w                 | /2%CaCl2&_        |
|   |  |  |                      | 1/4#/sx Floce               | ele               |
| 6 1/4   | 4 1/2  | 1540   |                      | 75  sx  50-50P              |                   |
|   | 2 3/8  | 1523   | 0                    | .5%TF04.1#/s                | x_Celloflak       |
| TEST DATA AND REQUEST FO  | OR ALLOWABLE (Test must be a   | fter recovery of total vali<br>opth or be for full 24 hour |                      | d must be equal to or       | exceed top allow- |
| Oll. WELL Date First New Cil Run To Tanks                         | Date of Test   | Producing Method (Flor                                     |                      | esc. l                      | 77.               |
| Date rifet New Cil Run 10 1unks                                   | 34,5 0. 144  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                    |                      |                             |                   |
| Length of Test  | Tubing Pressure  | Casing Pressure  | £ 3 1                | Choke Size<br>1/11/2/1/1986 |                   |
| Actual Prod. During Test  | Oil-Bbla.  | Water-Bbis.  | - k.                 | Gas-MCF                     |                   |
| •   | /  |  |                      |                             |                   |
|   |  |  |                      | Dist. S                     |                   |
| GAS WELL Actual Prod. Teet-MCF/D                                  | Length of Test   | Bbis. Concensate/MMC                                       | F ,                  | Gravity of Condensat        | •                 |
| 262   | 24 Hours   |  | •                    | N A                         |                   |
| Testing Method (pitot, back pr.)                                  | Tubing Pressure (Shut-in)  | Casing Pressure (Shut                                      | -in)                 | Choke Size                  |                   |
| Choke Nipple  | 130  | 130  |                      | 3/8                         |                   |
| CERTIFICATE OF COMPLIANCE   |  | OIL  | CONSERVAT            | TON COMMISSIO               | DN                |
|   |  |  |                      | JANh2 1                     | 1986              |
| I hereby certify that the rules and r                             | egulations of the Oil Conservation   | APPROVED   |                      |                             | , 1955            |
| Commission have been complied washove is true and complete to the | ith and that the information given best of my knowledge and belief.  | BY   |                      |                             |                   |
|   |  |  | SUPERVISOR           | STRICT # 3                  |                   |
|   | _  | TITLE  |                      |                             |                   |
| 1/0/1-  | 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. |  |                      |                             |                   |
| (Signal   |  |  |                      |                             |                   |
| Dale Belden   | District Clerk   | 1.3  |                      | be (Uled out comp           |                   |
| (Tii  | •  | able on new and re   | completed well       |                             |                   |
| Januar  | Fill out only  | Sections I, II.  | III, and VI for char | anges of owner              |                   |
| (Da   | well name or number, or transporter, or other such change of condition  Separate Forms C-104 must be filed for each pool in multiply   |  |                      |                             |                   |
|   |  | completed wells.   | _ 147 111876         |                             |                   |
| • :   |  |  |                      |                             |                   |
|   | •  |  |                      |                             |                   |