

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Arree, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Tiffany Gas Co.		Well API No. 30-045-27944
Address P.O. Box 50, Farmington, NM 87499		
Person(s) for Filing (Check proper box) New Well ☒ 2529970 Recompletion ☐ Change in Operator ☐		RECEIVED FEB 1 4 1994 OIL CON. DIV. DIST. 3
Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name USG Section 18	Well No. 55	Pool Name, including Formation Hogback Dakota 32680	Kind of Lease State, Federal or Pco	Lease No. I-89-IND-58
Location Unit Letter N : 1025' Feet From The South Line and 1575' Feet From The West Line Section 7 Township 29N Range 16W , NMPM , San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Meridian Oil Trading, Inc. 2529970	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	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.
	N	7
		29N
		16W
If this production is commingled with that from any other lease or pool, give commingling order number:	Is gas actually connected?	When?
	No	

IV. COMPLETION DATA

Designate Type of Completion - (X) ☒ New Well ☐ Gas Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Rea'v ☐ Jiff Rea'v	Date Spudded 7/12/90	Date Compl. Ready to Prod. 7/25/90	Total Depth 718.5' GR	P.D.T.D. NA
Elevations (D.F., H.K.U., H.T., GR, etc.) 5034' GR	Name of Producing Formation Hogback Dakota	Top Oil/Gas Pay 717.75' GR	Tubing Depth 705.5' GR	Depth Casing Shoe 706.5' GR
Perforations None - open hole	TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE 10 1/4" 6 1/4"	CASING & TUBING SIZE 7" 23# N-80 4 1/2" 11.6# J-55 2 3/8" 4.7# J-55	DEPTH SET 44' GR 706.5' GR 705.5' GR	SACKS CEMENT 90 sx circulated 90 sx circulated	

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 Tank 7/25/90	Date of Test 7/27/90	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 7 psi	Casing Pressure 7 psi	Choke Size none
Actual Prod. During Test 34 bbls.	Oil - Bbls. 34	Water - Bbls. 0	Gas - MCF TSTM
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MHCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

Sean C. Burr
Signature
Sean C. Burr
Printed Name
7/27/90
Date
(505) 325-1701
Telephone No.

OIL CONSERVATION DIVISION
Frank J. Quay
Date Approved
By
Title **SUPERVISOR DISTRICT # 3**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1101

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