OPEN FLOW TEST DATA

			Date: _	December 12	, 1967
Operator:	R & G Drilling	Соправу	Lease:	Lunt #61-	
Location:	Sec. 6, Townshi	p 30N, Range 13W	County:	San Juan	State: New Mexic
Formation:	Dakota		Pool:	Besin Deko	te
Casing:	4 " Set	<u>6350</u>	' Tubing:	2 3/8 " Se	6290
Pay Zone:	6104 1 To:	6296	' Total Dep	th: 6355	PB 6312
Choke Size:	3/4 BLH		" Choke Con	stant = C = .	14.1605
Stimulation	Method:		Flow Through:	Casing	Tubing X
Shut-in Pres	sure Casing:	psig / 12	=	psia (Shut-	in <u>*</u> da y s)
Shut-in Pres	sure Tubing:	1712 psig / 12	= 1712	psia	
Flowing Pres	sure: P :	156 psig / 12	= 168	psia	
Working Pres	sure: P _w :	psig ≠ 12	=	psia	
Temperature:	T :	47 °F / 460	= 507	OAbsolute	
F _{pv} (from t	ables) : <u>1.</u>	Ol8 Gravity	Est615	n 75	
Choke Volume 14.1605 X	= Q = C x P _t x 168 4 1.0127 % .98 Q =	77 X 1.018	=242	2	MCF/D
Open Flow - A	Aof = Q	P _c - P _w 2	n		
1	Aof <u>=</u>	2,930,944 2,902,720	= 1.00	97 * 1.0672	
I	Aof =	2439	MCF/D		DEC 1 3 1967
Tested By:				a a	IL CON. COM.
Witnessed By:	·				DIST. 3

Calculated By
Geolectric, Inc.

SANTA FL FILE U.S.G.S. LAND OF FICE IRAL PORTER OIL	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AUT ANSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-17 Effective 1-1-65		
OPERATOR 2 PROHATION OFFICE Operator					
R & G DRILLING COM		ox 254 Farmington, N.	M. 87401		
Reason's) for filing (Check proper box New Well Recompletion Change in Ownership	Change in Transporter of: Cil XX Dry G	Other (Please explain)			
If change of ownership give name and address of previous owner					
I. DESCRIPTION OF WELL AND	LEASE	Formation Kind of Lease	Lease No.		
Lunt	Well No. Pool Name, Including 61 Basin Dako		or Fee Federal NM09867A		
Unit Letter A : 11:	Peet From The N Li	ine and 890 Feet From T	he E		
Line of Section To	wnship 30N Range	13W , NMPM, San	Juan County		
Name of Authorized Transporter of Of Permian Corporation Name of Authorized Transporter of Ca AND THE TRANSPORTER OF CA If well produces of or liquids, que location of tanks.	singhead Gas or Dry Gas 09. Unit Sec. Twp. Age.	P.O. Box 1702 Farmi Address (Give address to which approx Is gas actually connected? Whe	ed copy of this form is to be sent)		
V. COMPLETION DATA Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Perforations			Depth Casing Shoe		
·	TUBING, CASING, AN	ND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	TOP AND OWARD F. (Top you be	after recovery of total volume of load oil	and must be equal to or exceed top allow-		
V. TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks	Date of Test	depth or be for full 24 hours) Producing Method (Flow, pump, gas li			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF		
			1		
GAS WELL	I could of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Actual Frod. Test-MCF/D	Length of Test	Cosing Pressure (Shut-in)	Choke Star 15 CO		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				
VI. CERTIFICATE OF COMPLIA!	NCE	MAP	OIL CONSERVATION COMMISSION MAP 1 2 1979		

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules 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.

(Date)

FOR: R & G DRILLING COMPANY Tull ! P. Bignature)

Ewell N. Walsh,

President

Walsh Engineering & Prod. Corp.

(Tale) 3/6/79

APPROVED.

TITLE .

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

SUPERVISOR DIST. 43

Original Signed by A. R. Kendrick

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.

All sections of this form must be filled out completely for allow-able 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 multiply completed wells.