| 1. | DESCRIPTION DESCRIPTION STATEST FILE U.S.G.S. LAND DEFISE IRA: PORTER OIL GAS OPERATOR PROPATION OFFICE Consolidated Oil & Gas Address 1860 Lincoln Street, I Reason(s) for filing (Check proper box New Well X Recompletion Change in Owiership | AUTHORIZATION TO TRANS., Inc. s, Inc. incoln Tower Bldg., Denv | Other (l'Icase explain) | Form C-104 Supercredes Old C-104 and C-1 Eller tive 1-1-65 |
|-----|--|--|--|--|
| | If change of ownership give name and address of previous owner | | | |
| iI. | DESCRIPTION OF WELL AND Lease Flume Freeman | Well No. Fool Name, Including F | į. | TICNIM |
| | Unit Letter 11C11; 790 Feet From TWorth Line and 1980 Feet From The West | | | |
| | | | | |
| | | | | IdII County |
| II. | Inland Corporation Name or Authorized Transporter of Cosinghedd Gas or Dry Gas X El Paso Natural Gas Co. | | P. O. Box 1528, Farming Address (Give address to which appro P. O. Box 990, Farmingt | ton, New Mexico 87401 ved copy of this form is to be sent) con, New Mexico 87401 |
| | If well produces oil or liquids. Unit Sec. Twp. Rge. Is gas actually connected? When give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When | | | |
| | If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Cit Well Gas Well New Well Workover Deepen Plug Back Same Resty. Diff. Resty. | | | |
| | Designate Type of Completic | X = (X) | X | |
| | Date Spudded 8-5-78 | Date Compl. Ready to Prod. 10-13-78 | Total Depth 6800' | P.B.T.D. 6750' |
| | Elevations (DF, RKB, RT, CR, etc.) 5719 GL 5731 RKB | Name of Producing Formation Blanco Mesaverde | Top Oil/Gas Pay 4389' | Tubing Depth 4502" |
| | Perferations 4389' - 4711' | | | Depth Casing Shoe 6790' |
| | TUBING, CASING, AND CEMENTING RECORD | | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | 12-1/4" 7-7/8" | 8-5/8'' 5-1/2'' | 249' 6790' | 200 sx Cl B lst stage: 427 sx Pozmix |
| | 7 770 | | | 2nd stage: 387 sx Pozmi> |
| •• | TOOT DATA AND DECUECT FO | 1-1/4" | 4502' | i and must be equal to as areaed top allows |
| ۲. | TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Bun To Tanks Date of Test (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) Producing Method (Flow, pump, gas lift, etc.) | | | |
| | Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| | Actual Prod. During Test | Cti-Bbis. | Water-Bble. | Gas-MCF |
| | Noted Fied, Ediling 1991 | | | |
| | CAC NELL | | | and the second s |
| : | GAS WELL Actual Fred. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| į | AOF 4521; CV 2150 | 3 hrs Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| 1 | 1 pt back pressure | 950 psi | 954 psi | 3/4" |
| Л. | CERTIFICATE OF COMPLIANC | CE | OIL CONSERVA | TION COMMISSION |
| | I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given shove is true and complete to the best of my knowledge and belief. | | APPROVED, 19 | |
| | | | sy Original Signed by | A. R. Kendrick |
| | | | TITLE | |
| | DT Stage | | This form is to be flied in compliance with RULE 1104. | |
| | D.I. Stoppe J | | If this is a request for allowable for a newly utilied or despended well, this form must be accompanied by a tabulation of the deviation | |
| | Vice Pres., Operations | : Gulf Coast, West Tex Di | temte taken on the well in accordance with MULE 111. | |
| | August 31, 1978 | | | |
| | | · | er - representation of the secretary | |