

Form O-103 Revised 10-1-70	
OIL CONSERVATION DIVISION	
REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
Consolidated Oil & Gas, Inc.	
Address P.O. Box 2038, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>	
If change of ownership give name and address of previous owner	
DESCRIPTION OF WELL AND LEASE	
Lease Name: Lea Well No.: 1M Pool Name, Including Formation: Blanco Mesa Verde Kind of Lease: XXX, Federal or XXXX Lease No.: 82-078244	
Location Unit Letter: C : 790 Feet From The N Line and 1680 Feet From The W Line of Section: 30 Township: 31N Range: 12W, NMPM, San Juan County	
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Address (Give address to which approved copy of this form is to be sent) Giant Refinery P.O. Box 256, Farmington, N.M. 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Address (Give address to which approved copy of this form is to be sent) Southern Union Gathering Co. P.O. Box 1899, Bloomfield, N.M. 87413	
If well produces oil or liquids, give location of tanks. Unit: C Sec.: 30 Twp.: 31N Rge.: 12W Is gas actually connected? Yes When	
If this production is commingled with that from any other lease or pool, give commingling order number:	
COMPLETION DATA	
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'tv. Diff. Res'tv.	
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, AND CEMENTING RECORD	
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT	
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 Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)	
Length of Test Tubing Pressure Casing Pressure Choke Size	
Actual Prod. During Test Oil-Bbls. Water-Bbls. Gas-MCF	
GAS WELL	
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate Gravity of Condensate	
Testing Method (pilot, back pr.) Tubing Pressure (Shot-in) Casing Pressure (Shot-in) Choke Size	
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.	
Signature: [Signature] Production & Drilling Superintendent (Title) June 8, 1982	
OIL CONSERVATION DIVISION APPROVED JUN 21 1982 BY Original Signed by CHARLES GHOLSON TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 3	
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. All sections of this form must be filled out completely for allowable on new and recompleted wells. This form only serves as a request for allowable for changes of oil well production and does not constitute a change of oil well production.	