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U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
2
PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

Operator Consolidated Oil & Gas, Inc.	
Address 1860 Lincoln Street, Denver, Colorado 80295	
Reason(s) for filing (check proper box)	
New Well <input checked="" 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 type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE			
Lease Name O'Shea	Well No. Pool Name, including Formation 1-M Basin Dakota	Kind of Lease State, Federal or Fee Fee	Lease No.
Location			
Unit Letter F	1450	Feet From The north	Line and 1750
Line of Section 3		Township 31N	Range 13W, NMFM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Asamera Oil, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 118, Denver, Colorado 80201				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering Co.	Address (Give address to which approved copy of this form is to be sent) St. 1850, First International Bldg., Dallas, Tex. 75270				
If well produces oil or liquids, give location of tanks. Unit K	Sec. 3	Twp. 31N	Rge. 13W	Is gas actually connected? No	When

IV. COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/>	New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'tv. <input type="checkbox"/> Diff. Res'tv. <input type="checkbox"/>	
Date Spudded 7/28/79	Date Compl. Ready to Prod. 12/8/79	Total Depth 6928	P.B.T.D. 6909
Elevations (DF, RAB, RT, GR, etc.) GR 5838'	Name of Producing Formation Dakota	Top Oil/Gas Pay	Tubing Depth 6747
Perforations 6706-6906 (33-0.32" holes)			Depth Casing Shoe 6918
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	282	200
7-7/8"	5-1/2"	6918	225 & 265
	1-1/2"	6747	

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 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 2182	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) 1 pt. back pressure	Tubing Pressure (shut-in) 1555	Casing Pressure (shut-in) 1054	Choke Size 3/4

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED MAR 4 1980 , 19	
BY <u>Senior Production Engineer</u>		BY <u>Original Signed by FRANK J. CHAVEZ</u>	
February 26, 1980		TITLE <u>SUPERVISOR DISTRICT # 3</u>	
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.		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.			