

P. O. BOX 2038

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
REGISTRATION OFFICE	

Consolidated Oil & Gas, Inc.

Address

P. O. Box 2038, Farmington, New Mexico 87401

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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry 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	Jackson	Well No.	2E	Pool Name, including Formation	Basin Dakota	Kind of Lease	State Federal or XXX X	Lease No.	NM021125
Location	Unit Letter 0 ; 815 Feet From The South Line and 1550 Feet From The East								
Line of Section	18	Township	31N	Range	12W	NMPM,	San Juan	County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Inland Corporation	Address (Give address to which approved copy of this form is to be sent)	P. O. Box 1528, Farmington, New Mexico 87401				
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)	P. O. Box 1899, Bloomfield, New Mexico 87413				
If well produces oil or liquids, 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:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
		X	X					
Date Spudded	8-4-80	Date Compl. Ready to Prod.	3-20-81	Total Depth	7085'	P.B.T.D.	7036'	
Elevations (DF, RKB, RT, CR, etc.)	5890' GR	Name of Producing Formation	Dakota	Top Oil/Gas Pay	6775'	Tubing Depth	6854'	
Perforations	6775'-6868'; 19 - .32" holes					Depth Casing Shoe	7085'	

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8", 24#	260'	200
7-7/8"	4-1/2", 11.6 & 10.5#	7085'	1410
-	1-1/2", 2.9# Tbg	6854'	-

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)

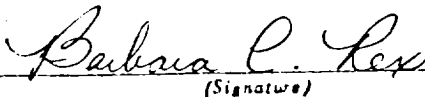
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL Test: 3-20-81

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
CV 273 AOF 338	3 hrs	-	-
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	713 psig	713 psig	2" X 3/4" pos ck

VI. 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.



Drilling & Production Technician

March 27, 1981

OIL CONSERVATION DIVISION

APPROVED APR 7 1981

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

TITLE

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 reactions 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.