h ————————————————————————————————————	<b>→</b>	1			
DISTRIBUTION	NEW MEXICO OIL	NEW MEXICO OIL CONSERVATION COMMISSION Form Color			
SANTA FE	DECUSE TO THE TOTAL OF THE TOTA				
FILE		AND	Suj Efi	persedes Old C-104 and C-1 lective 1-1-65	
ป.\$.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
LAND OFFICE	AUTHORIZATION TO I	KANSPORT OIL AND N	ATURAL GAS		
TRANSPORTER OIL					
GAS					
OPERATOR					
1. PRORATION OFFICE Operator			PARK	The second second	
Oxoco Produc	tion Corp.				
Address	-		La Ver	2 m 3	
Reason(s) for filing (Check proper b	Farmington, N.M. 8				
New Well		Other (Please e	xplain)		
	Change in Transporter of:		V.		
Recompletion XX		Gas	s Pels		
Change in Ownership	Casinghead Gas Con	densate			
If change of ownership give name and address of previous owner			•		
II. DESCRIPTION OF WELL AND	O LEASE				
Lease Name	Well No. Pool Name, Including	Formation K	ind of Lease	Legse No.	
Trail Canyon		I	ate, Federal or Fee Fe	_	
Location Carry Cir	2   Blanco Me	saverde   5	Fe	d. NM-33055	
Unit Letter H ; 15	660 Feet From The North	_ine and830	Feet From The <u>East</u>		
Line of Section 18 T	ownship 32 North Range	8 West , NMPM,	San Juan	County	
III. <u>DESIGNATION OF TRANSPO</u>	PTED OF OIL AND NATURAL (	746			
Name of Authorized Transporter of C	or Condensate	Address (Give address to u	dial and the		
27		Tradicas (Othe address to a	mich approved copy of thi	s form is to be sent)	
None Name of Authorized Transporter of C					
	<del>XX</del>	Address (Give address to u	hich approved copy of thi	s form is to be sent)	
El Paso Natural		P.O. Box 990.	Farmington.	N M 87499	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	11.111. 07477	
give location of tanks.	1 1 1	No	Est. Aug	ust, 1983	
If this production is commingled w. COMPLETION DATA	rith that from any other lease or pool	l, give commingling order nu			
	Oil Well Gas Well	New Well Workover	Deepen Plug Back	Same Resty, Diff. Resty.	
Designate Type of Complet	ion – (X)	x	V	· •	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	<u>Х</u>	<u> </u>	
1-23-'81	7-12-'83	•			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	7597 Top Oil/Gas Pay	759		
	1221 777 670015		Tubing Depti	ı	
6733' RKB, 6720'Gr. Mesaverde		5697'		5983'	
			Depth Casino	Depth Casing Shoe	
5697' to 5824' and			7559	9'	
	1	ID CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SAC	CKS CEMENT	
14 3/4"	10 3/4", 40.5#	288'	3.	7.5	
9 7/8"	7 5/8", 24.6#	3944'		75	
6 3/4"	4 1/2", 11.6&10.			56	
	2 3/8", 4.7#	5983'			
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume of	f load oil and muss he see	val to or arrand to 11	
OIL WELL	able for this d	lepth or be for full 24 hours)	' ou mim west na sól	to or exceed top allow-	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pu	mp, gas lift, etc.)	<u> </u>	
None				į	
Length of Teet	Tubing Pressure	Casing Pressure Choke Size			
Actual Deed Duster Meet	OII Phie				
Actual Prod. During Test	Oil-Bbls.	Water-Bbls. Gas-MCF			
GAS WELL		,			
Actual Prod. Test-MCF/D	Length of Test	Bble Condenses 22 (27		···	
2,885		Bbls. Condensate/MMCF	Gravity of Co	naensate	
Testing Method (pitot, back pr.)	3 hrs.	None			

Back pressure 1007 psi 1004 psi 3/4"

## 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.

(Title) July 13, 1983

OIL CONSERVATION COMMISSION

261983

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 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. Conserve Forms C-104 must be filed for each nool in multiple