

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION 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-110
Effective 1-1-65

Operator Koch Exploration Company(Division of Koch Industries, Inc.)	
Address P.O. Box 2256; Wichita, Kansas 67201	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Change in Ownership <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 Gardner	Well No. 5	Producing Formation Blanco/Mesa Verde	Kind of Lease State, Federal or Free Federal	Lease No. NM-013642
Location Unit Letter M ; 835 Feet From The South ; 1120 Feet From The West Line of Section 26 Township 32N Range 9W , 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"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc.	P.O. Box 1492; Farmington, NM
Name of Authorized Transporter of Gas/Liquid 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)
Northwest Pipeline Corp.	P.O. Box 1526; Salt Lake City, Utah
If well produces oil or it gases, give location of tanks.	Unit Sec. Twp. Range M 26 32N 9W
Is it naturally connected?	When
No	4-1-81

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 <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	Flow Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Save Resv. <input type="checkbox"/>	Diff. Resv. <input type="checkbox"/>
Date Spudded 9-23-80	Date Compl. Ready to Prod. 11-8-80		Total Depth 6200		B.P. (ft.) 6120			
Elevations (DF, RKB, RT, GR, etc.) GR 6570 KB 6582	Name of Producing Formation Mesa Verde		Top of Pay 5440-5793		Tubing Depth 5764			
Perforations 5440-5793 Mesa Verde (36 Holes)					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
14-3/4	10-3/4		194		275 sx			
8-3/4	7		3602		575 sx			
6-1/4	4-1/2		6197		400			
	2-3/8		5764					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be allowable for this depth or be for full 24 hours)

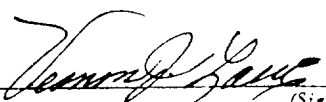
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1800	Length of Test 24	Bbls. Condensate/MMCF N/A	Gravity of Condensate N/A
Testing Method (pitot, back pr.) Back pr	Tubing Pressure (Shut-in) 650#	Casing Pressure (Shut-in) 1025#	Choke Size 3/8"

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.


(Signature)
Assistant Operations Manager
(Title)
February 12, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 24 1981, 19
Original Signed by FRANK T. CHAVEZ
BY
TITLE SUPERVISOR DISTRICT # 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.
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.