



OIL CONSERVATION COMMISSION

STATE OF NEW MEXICO
P. O. BOX 2088 - SANTA FE
87501

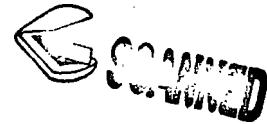
DIRECTOR
JOE D. RAMEY

LAND COMMISSIONER
PHIL R. LUCERO



STATE GEOLOGIST
EMERY C. ARNOLD

October 8, 1976



Minerals Management, Inc.
Petroleum Center Bldg - Suite 210
501 Airport Drive
Farmington, New Mexico 87401

Attention: Mr. J. A. Snell

Administrative Order TX-49

Gentlemen:

Reference is made to your letter dated September 7, 1976, requesting administrative approval of an exception to the tubing setting depth requirements of Commission Rule 107 (d) (3) to permit setting tubing in the Filon Exploration Corporation Federal 21 Well No. 1 located in Unit K of Section 21, Township 20 North, Range 5 West, NMPM, McKinley County, New Mexico at approximately 2995 feet.

Pursuant to the authority granted me by Commission Rule 107 (d) (4), Filon Exploration Corporation is hereby granted the exception outlined above, subject to possible future rescission in the event waste appears to be caused thereby.

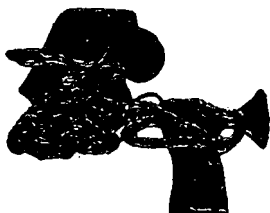
Very truly yours,

JOE D. RAMEY
Secretary-Director

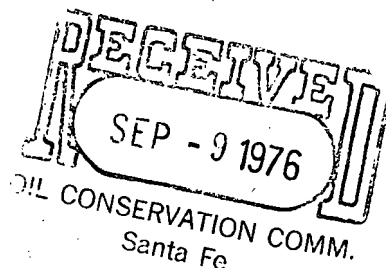
JDR/DSN/og

cc: U. S. Geological Survey - Farmington
Oil Conservation Commission - Aztec

PV2V/2004335228



MINERALS MANAGEMENT INCORPORATED
A Division of SCIENTIFIC SOFTWARE CORPORATION



September 7, 1976

Mr. Joe D. Ramey
New Mexico Oil Conservation Commission
P.O. Box 2088
Santa Fe, New Mexico 87501

Dear Sir:

Administrative exception is requested to Rule 107, subparagraph (3)(d), for Filon Exploration Corporation's Federal 21 Well No. 1, to set tubing perforations at 2995' with top of the pay at 5877'.

The well is completed in the Entrada formation with production established as outlined on the attached C-104. The characteristic high working fluid level of wells completed in this formation precludes the need to place the tubing further down hole.

Continued confidential treatment of this well data is appreciated.

Yours very truly

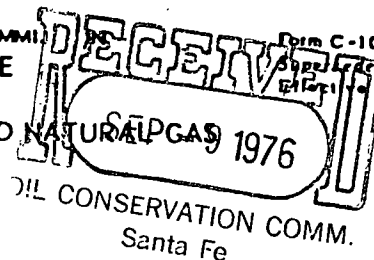
J. Arnold Snell
Area Manager

WEL/cw

Attachment

NO. OF COPIES RECEIVED	4
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	1
PRORATION OFFICE	

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



Operator Filon Exploration Corporation	
Address c/o Minerals Management, 501 Airport Dr., Suite 105, Farmington, New Mex. 87401	
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Change In Transporter of: Recompletion <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Change In Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Federal 21	Well No. 1	Pool Name, Including Formation Wildcat-Entrada	Kind of Lease State, Federal or Fee Federal	Lease No. NM-5980
Location Unit Letter K : 2310 Feet From The South Line and 2310 Feet From The West Line of Section 21 Township 20N Range 5W , NMPM, McKinley County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1183 Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 21	Twp. 20N	Rge. 5W	Is gas actually connected? No	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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 7-20-76	Date Compl. Ready to Prod. 8-20-76		Total Depth 6110		P.B.T.D. 6031			
Elevations (DF, RKB, RT, CR, etc.) 6787 KB	Name of Producing Formation Entrada		Top Oil/Gas Pay 5877		Tubing Depth			
Perforations					Depth Casing Shoe 6109			

CONFIDENTIAL

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15	10 3/4	215	200
8 3/4	7	5870	440
6 1/8	4 1/2	5690-6109	50
	2 7/8	2992	-

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 8-20-76	Date of Test 8-26-76	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 22 hrs.	Tubing Pressure 0	Casing Pressure 0	Choke Size -
Actual Prod. During Test 197	Oil - Bbls. 197	Water - Bbls. 0	Gas - MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

J. Arnold Sell
(Signature)

Area Manager/Minerals Management, Inc.
(Title)

August 27, 1976
(Date)

OIL CONSERVATION COMMISSION

AUG 30 1976
APPROVED _____, 19_____
BY **MR. Kendrick**
TITLE **SUPERVISOR 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.

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.