

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED
DISTRIBUTION

SANTA FE
FILE
U.S.G.B.
LAND OFFICE
TRANSPORTER
OPERATOR
PRODUCTION OFFICE

☒
☒
☒
☒
☒
☒
☒

☒
☒
☒
☒
☒
☒
☒

☒
☒
☒
☒
☒
☒
☒

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
JUL 01 1983
O. C. D.
ARTESIA, OFFICE

Operator
Cibola Energy Corp. ✓

Address
P.O. Box 1668, Albuquerque, New Mexico 87103

Reason(s) for filing (Check proper box)
New Well ☒ Change In Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change In Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name
CX Plains

Well No.
3

Pool Name, Including Formation
Race Track SA

Kind of Lease
State, Federal or Fee Fee

Lease No.

Location
Unit Letter P : 330 Feet From The South Line and 330 Feet From The East
Line of Section 19 Township 10S Range 28E, NMPM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Navajo Crude Oil Purchasing Company

Address (Give address to which approved copy of this form is to be sent)
P.O. Box 159, Artesia, N.M. 88210

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
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
P

Sec.
19

Twp.
10S

Rge.
28E

Is gas actually connected?

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 X Gas Well New Well X Workover Deepen Plug Back Same Res'v. Diff. Fr.

Date Spudded
6/15/83

Date Compl. Ready to Prod.
6/28/83

Total Depth
2312'

P.B.T.D.
2312'

Elevations (DF, RKB, RT, GR, etc.)
3745.1

Name of Producing Formation
San Andres

Top Oil/Gas Pay
2208'

Tubing Depth
2128'

Perforations
2208-2227, 2241-2243, 2246-2256

Depth Casing Shoe
2312'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE
10"
7 7/8"

CASING & TUBING SIZE
8 5/8"
4 1/2"
2 3/8"

DEPTH SET
320'
2307'
2128'

SACKS CEMENT
150 sx class C cmt 2% CaCl
125 sx self stress

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks
6/25/83

Date of Test
6/25/83 Swab test

Producing Method (Flow, pump, gas lift, etc.)
pump

Length of Test
5 hrs.

Tubing Pressure

Casing Pressure

Choke Size

Actual Prod. During Test
25 bbls

Oil-Bbls.
25 bbls

Water-Bbls.
0

Gas-MCF
TSTM

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MMCF

Gravity of Condensate

Testing Method (prior, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Production Secretary
6/29/83

(Signature)
(Title)
(Date)

OIL CONSERVATION DIVISION

APPROVED
JUL 14 1983

BY
TITLE
OIL AND GAS INSPECTOR

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 device tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions.
Separate Forms C-104 must be filed for each pool in multi-completed wells.