| SEP 1 6 1997 SEP | | DISTRIBUTION SANTA FE FILE | NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE Supersedes Old C-104 e AND Effective 1-1-65 | | | |
|--|---------------------------------|---|--|---|--|--|
| PRODUCTION OF FIRE | | LAND OFFICE | AUTHORIZATION TO TR | | 1) 10 14 CAY (V) TE | |
| No. Producting 13, 8 N.M. Inc. | ı. | PRORATION OFFICE |] |] ; | 11 - 0 1001 | |
| Nine Greenway Plaza, Suite 2700, Houston, Texas 77046 Start West Recognition Change in Transport of Start West Recognition Change in Transport of Start West Recognition Cantinghead One Can | Mobil Producing TX. & N.M. Inc. | | | | | |
| Property | | Reason(s) for I/ling (Check proper box) New Well Change in Transporter of: Other (Please explain) To change oil/condensate gatherer to | | | | |
| B. DESCRIPTION OF BELL AND LEASE DESCRIPTION OF BELL AND LEASE JICATI 11 G JOSAN 11 GO TO SHOW SHAPE SHAP | | |)===(= · · · · · | → ☐ The Permian Corp | ., effective November 1, | |
| Lines Name Jicarilla G | | | | | | |
| Jicarilla 6 7-A Blanco Mesa Verde Sints, Federal or F Federal Lowerinn Unit Little 990 Feet From The North Line and 990 Feet From The Mest Line of Section 36 Taumbale 27-N Immae 3-W IMMPAL RIO AFFIDA Rio AFFIDA Rio AFFIDA Rocal affidation of Common State of Coll AND NATURAL GAS Rocal affidation of Common State of Coll AND NATURAL GAS Rocal affidation of Common State of Coll AND NATURAL GAS Rocal affidation of Common State of Coll Coll Common State of Common State of Coll Coll Coll Coll Coll Coll Coll C | n. | | | | | |
| Unit Letter D | | Jicarilla G | 1 | ··· | | |
| Designate Type of Completion — (X) Name of Producing Formation Top Cit/Gos Pay Tubing Depth Perforations Designate Type of Completion — (X) Name of Producing Formation Top Cit/Gos Pay Tubing Depth Perforations Top Cit/Gos Pay Tubing Depth Perforations Tubing Depth Top Cit/Gos Pay Tubing Depth Perforations Tubing Depth Tubing D | • | D 99 | O Feet From The North Lin | ne and 990 Feet From 7 | rheWest | |
| Register of Authorized Temporator of Condensets (T) The Perminan Corporation Perminan (Eff. 97.1/87) P. O. Box 1183, Houston, Texas 77001 | | Line of Section 36 Township 27-N Range 3-W , NMPM, Rio Arriba County | | | | |
| Rorthwest Pipeline Corp. 1901 58c. 19c. 1 | m. | Name of Authorized Transporter of Oil | | | | |
| If well productes all or liquide, give location of damas. D 36 27-N 3-W Yes If this production is commingled with that from any other Jease or pool, give commingling order number? IV. COMPLETION DATA Designate Type of Completion — (X) Tubing Peasure Type of Completion — (X) Tubing Peasure Type of Completion — (X) Designate Type of Completion — (X) Designate Type of Completion — (X) Tubing Peasure Type of Completion — (X) Designate Type of Completion — (X) Designate Type of Completion — (X) Tubing Peasure Type of Completion — (X) Designate Type of Completion — (X) Designate Type of Completion — (X) Designate Type of Completion — (X) Tubing Peasure Type of Completion — (X) Designate Type of Completion — (X) Type Out Type Type Type Type Type Type Type Type | | | | P. O. Box 1183, Houston | n, Texas 7700] | |
| This production is commangled with that from any other Jease or pool, give committing order number If this production is commangled with that from any other Jease or pool, give committing order number If this production is commingled with that from any other Jease or pool, give committing order number If this production is commingled with that from any other Jease or pool, give committing order number If this production is commingled with that from any other Jease or pool, give committing order number If this production is commingled with that from any other Jease or pool, give committing order number If this production is committed with that from any other Jease or pool, give committing order number If this production is committed with that from any other Jease or pool, give committing order number | | | | 3539 E. 30th St., Farm | nington, NM 87401 | |
| Designate Type of Completion — (X) Designate Type of Completion — | | give location of tanks. D 36 27-N 3-W Yes | | | | |
| Designate Type of Completion — (X) Designate Type of Completion — | | V. COMPLETION DATA | | | | |
| Elevations (DF, RRB, RT, CR, etc.;) Name of Producing Formation Top Oil/Gos Pay Tubing Depth Tubing Depth Tubing Depth Tubing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT SACKS CEMENT For in the after recovery of total volume of load oil and must be equal to an exceed top allowed to consider from the state of the stat | | | n – (X) | | | |
| TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE (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 ze hours) Dist First New Oil Run To Tanks Length of Teet Length of Teet Tubing Pressure Cosing Pressure (Cosing Pressure (First-Lim) Cosing Pressur | | Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | |
| TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE The for this depth or be for full ze hours? Date First New Cill Run To Tanks Date of Test Length of Test Cosing Pressure (Shut-1a) Cosing Pressure (Shut-1a) Cosing Pressure Cosing Pressure (Shut-1a) Cosing Pr | | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | |
| V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Cosing Press | į | Perforations | | | Depth Casing Shoe | |
| V. TEST DATA AND REQUEST FOR ALLOWABLE able for this depth or be for full 2d howes Date of Test Actual Prod. During Test Cosing Pressure (Shut-ia) Cosing Pressure Cosing | | U01 E 217E | | | SACKS CEMENT | |
| OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Cosing Pressure Cosing Pressure Cosing Pressure OIL CON. DIV. Actual Prod. Test-MCF/D Length of Test Testing Method (puot, back pr.) Tubing Pressure (shut-in) Touring Pressure (shut-in) Cosing Pressure (shut-in) Cosing Pressure (shut-in) Cosing Pressure (shut-in) Cosing Pressure (shut-in) OIL CONSERVATION COMMISSION APPROVED I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information gives above is true and complete to the best of my knowledge and belief. Authorized Agent (Signature) Authorized Agent (Tale) 10-26-84 (Date) Producing Method (flow, pump, gas life, etc.) (Cosing Pressure (flow) Cosing Pressure (shut-in) Choice Size OIL CONSERVATION COMMISSION APPROVED NOV 05 1984 TITLE SUPERVISOR DISTRICT # 3 This form is to be filled in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despende well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All ascitons of this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All ascitons of this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All ascitons of this form must be accompanied by a tabulation of the deviation on the well in accordance with RULE 111. All ascitons of this form must be accompanied on must be filled out completely for allowable on new and recompleted wells. Fill out only Sections 1, II, III, end VI for changes of condition. | | | 0.311.0 4 100110 512 | | | |
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| OIL WELL Date First New Oil Run To Tanks Date of Test Length of Test Length of Test Tubing Pressure Oil-Bbie. OIL CON. DIV. GAS WELL Actual Prod. During Test Oil-Bbie. OIL CON. DIV. Testing Method (puot, back pr.) Tubing Pressure (shut-in) Touching Pressure (shut-in) Coming Pressure (shut-in) OIL CONSERVATION COMMISSION Approved NOV 05 1984 OIL CONSERVATION COMMISSION Approved Thereby 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 SUPERVISOR DISTRICT #3 This form is to be filled in compliance with RULE 1104. If this is a request for allowable for a newly drilled or depended well, this come must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All ascitons of this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All ascitons of this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All ascitons of this form must be accompanied on must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of condition. | ν. | TEST DATA AND REQUEST FOR ALLOWABLE. Test must be after recovery of total volume of load oil and must be sound to or exceed top allo | | | | |
| Actual Prod. During Teet Oil-Bble. Water-Bble. NOV 05 1984 OIL CON. DIV. Actual Prod. Teet-MCF/D Length of Teet Bele. Condensate/Actual First. Teeting Method (puict, back pr.) Tubing Pressure (Shut-in) Cosing Pressure (Shut-in) Cosing Pressure (Shut-in) Cosing Pressure (Shut-in) Cosing Pressure (Shut-in) Oil Conservation Commission Approved NOV 05 1984 Approved NOV 05 1984 Approved NOV 05 1984 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 despended well, this form must be accompanied by a tabulation of the deviation files taken on the well in accordance with Rule 1104. If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation new and recomplated wells. Fill out only Sections I. II. III. and VI for changes of owner, we want to the present of the form must be filled out completely for allowable on new and recomplated wells. Fill out only Sections I. II. III. and VI for changes of owner, we have an example of condition. | İ | OII. WELL able for this de | | | | |
| GAS WELL Actual Prod. Test-MCF/D Length of Test Testing Method (pitot, back pr.) Tubing Pressure (Shut-is) Casing Pressure (Shut-is) Casing Pressure (Shut-is) Choke Size VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief. Authorized Agent (Signature) Authorized Agent (Date) OIL CONSERVATION COMMISSION APPROVED Supervisor DISTRICT # 3 This form is to be filled in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 1104. 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 condition. Well name or number, or transporter, or other such change of condition. | | Length of Test | Tubing Pressure | Cosing Pressure Co | Chore Sire | |
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| VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief. All 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. | ſ | | Length of Test | Bble. Condensate/MMGF/ST. 3 | Gravity of Condensate | |
| I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief. Supervisor district # 3 | | Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Cosing Pressure (Shut-18) | Choke Size | |
| Title Authorized Agent Title 10-26-84 (Date) Thereby certify that the fulled and regulations of two bit complision have been compiled with and that the information given above is true and complete to the best of my knowledge and belief. 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. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. | VI. | CERTIFICATE OF COMPLIANC | Æ | OIL CONSERVA | TION COMMISSION | |
| Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. SUPERVISOR DISTRICT # 3 This form is to be filled in compliance with RULE 1194. If this is a request for allowable for a newly drilled or despended 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. | 1 | Commission have been complied with and that the information given | | APPROVED NOV 05 1984 | | |
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| Authorized Agent (Tule) 10-26-84 (Date) All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I. II. and VI for changes of owner. well name or number, or transporter, or other such change of condition. | _ | [I].B. 0 | 16-5 | If this is a request for allow | If this is a request for allowable for a newly drilled or despened | |
| (Tule) 10-26-84 (Date) able 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. | - | | - | tests taken on the well in accord | lence with RULE 111. | |
| (Date) well name or number, or transporter, or other such change of condition. | • | Tu | le) | able on new and recompleted wel | iie. | |
| | - | | | well name or number, or transporter, or other such change or condition. | | |