

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OFFICE OF THE COMMISSIONER	
DIVISION	
SANTA FE	
FILE	
U.S.G.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	
Operator	

EPX Company

Address

Box 289, Farmington, New Mexico 87401

Reason(s) for filing (check proper box)

New Well ☐Recompletion ☐Change in Ownership ☒

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

El Paso Exploration Company, 1800 Wilco Building, Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Jicarilla Joint Venture	KD 8	Chacon Dakota Associated	State/Federal/ur Fee	Jicarilla Apache
Location				
Unit Letter	P K	1650 Feet From The	South Line and	1850 Feet From The
Line of Section	4	Township	23N	Range
			3W	NMPM, Rio Arriba
				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)					
Giant Refining, Inc.	P. O. Box 256, Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead 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)					
El Paso Natural Gas Company	Box 289, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rgs.	Is gas actually connected?	When

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

GAS WELL

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

VI. 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.

Drilling Clerk

December 1, 1981

OIL CONSERVATION DIVISION

APPROVED DEC 11 1981, 19

BY Original Signed by CHARLES GHOLSON

TITLE DEPUTY OIL & GAS INSPECTOR, 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 filled for each pool in multiply completed wells.