

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NAT
OPERATOR	
PRODUCTION OFFICE	

W. B. Martin & Associates

Address

2110 North Sullivan, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Martin-Florance	#9	S. Lindrith Gallup-Dakota	Jicarilla State, Federal or Fee Apache	362

Location

Unit Letter I: 1980 Feet From The South Line and 660 Feet From The East

Line of Section 5 NESE Township 23 North Range 4 West, NMPM, Rio Arriba County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Giant Industries, Inc.	P. O. Box 9156, Phoenix Az 85068					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Northwest Pipeline	295 Chipeta Way, Salt Lake City, UT 84110					
Well produces oil or liquids, or location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	5	23N	4W	No	90 Days

This production is commingled with that from any other lease or pool, give commingling order number: S. Lindrith Gallup-Dakota

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
03/31/83	05/13/83	7310'	7275'					
Productions (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
RKB 7075'	Gallup-Dakota Commingled	5939'	7051'					
Locations			Depth Casing Shoe					
5939-6378', 6593-6717', 6905'-6964', 6982-7049'			7308'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8" #24	318'	250 sks Class "B" w/2% CAC12
7 7/8"	5 1/2" #17	7308'	1st stage w/625 sks 50/50 Poz 2% Gel 6lb Kolite
	2 7/8"	7051'	2nd stage w/625 sks 50/50 Poz 2% Gel 6lb Kolite
			3rd stage w/400 sks 50/50 Poz 2% Gel 6 lb Kolite
			tail in 100 sks Class B 2% CAC12

TEST DATA AND REQUEST FOR ALLOWABLE
WELL(Test must be after recovery of total volume of test oil and must be equal to or exceed top oil
able for this depth or be for full 24 hours)

First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
05/13/83	05/15/83 & 05/16/83	Flowing & Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	125	125	1/2"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
142 BBLs	82 BO	60 BW	100 MCF

S WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Volume of Condensate
Testing Method (piston, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	

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
is true and complete to the best of my knowledge and belief.W. B. Martin & Associates
(Signature)Operator Representative
(Title)

May 17, 1983

(Date)

OIL CONSERVATION DIVISION

APPROVED

BY Original Signed by JOSEPH T. CHAVEZ

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 allow-
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.

Separate Form C-104 must be filed for each pool in multiply