

DISTRIBUTION		
INTAKE		
LE		
S.G.S.		
AND OFFICE		
TRANSPORTER	OIL	
	GAS	
PERATOR		
LOCATION OFFICE		
PERATOR		

P.O. BOX 2088
SANTA FE NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

W.B. Martin & Associates, Inc.
709 North Butler, Farmington, NM 87401

R
OCT 26 1984
OIL CON. DIV.
AMENDED *** Bracke
DIST. 3

Reason(s) for filing (Check proper box)

Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Completion	<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"/>

Change of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name Martin-Whittaker	Well No. 30	Pool Name, including Formation S. Lindrith Gallup-Dakota Ext.	Kind of Lease Federal	Lease No. 398
Location				
Unit Letter 0	900	Feet From The South	Line and 1660	Feet From The East
Line of Section 15	Township 23N	Range 4W	NMPM, Rio Arriba	County

SIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Texas 79978					
Well produces oil or liquids, Location of tanks.	Unit 0	Sec. 15	Line 23N	Range 4W	Is gas actually connected? N/A	When Waiting on Contract

If 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'r. <input type="checkbox"/>	Drill Feet <input type="checkbox"/>
Spudded 5/23/84	Date Compl. Ready to Prod. 9/21/84		Total Depth 7240'		P.B.T.D. 7238'			
Formations (DF, RKB, RT, GR, etc.) 7242' GR	Name of Producing Formation S. Lindrith Gallup-Dakota Ext		Top Oil/Gas Pay *** (5596-Gallup)		Tubing Depth 7115'			
Formations (Gallup-5596-6739)	*** (Dakota-7022-74)				Depth Casing Shoe 7238'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8" J-55 32#	268'	206.50ft ³ Class B 2%CaCl ₂
8 3/4"	7" J-55 26#	5359'	*(855ft ³ -10-RFC 50/50poz
6 1/4"	4 1/2" K-55 11.6#	5259-7238	316ft ³ 10-1 Thixaid
	2 3/8" 4.70#	7115'	N/A

TEST DATA AND REQUEST FOR ALLOWABLE 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)

First New Oil Run To Tanks /21/84	Date of Test 9/21/84	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Time of Test 4hrs	Tubing Pressure 50#	Casing Pressure 50#	Choke Size 3/4"
Oil Prod. During Test 3bbbls	Oil - Bbls. 61bbbls	Water - Bbls. 2bbbls	Gas - MCF 60mcf

WELL

Oil Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Flow 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 is true and complete to the best of my knowledge and belief.

W.B. Martin
(Signature)
Operator
(Title)
10/25/84
(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 26 1984, 19
BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT # 3
TITLE _____

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.