

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION		
SANTA FE		
FILE		
U.S.U.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

Operator
GREAT WESTERN RESOURCES INC.

Address
9800 Centre Parkway, Suite 900, Houston, Texas 77036

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)
 CHANGE OF OPERATOR
 From W.B. Martin & Associates, Inc.

If change of ownership give name and address of previous owner
 W. B. Martin & Associates, Inc. 709 North Butler Farmington, NM 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name: Martin-Whittaker
 Well No.: 50
 Pool Name, including Formation: Wildcat-Gallup
 Kind of Lease: Jicarilla Apache
 State, Federal or Fee (Federal):
 Lease No.: 78
 Location:
 Unit Letter: B ; 940 Feet From The North Line and 1700 Feet From The East
 Line of Section: 14 Township: 23N Range: 5W, NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate
 Giant Refining Company
 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 or Dry Gas
 El Paso Natural Gas Company
 Address (Give address to which approved copy of this form is to be sent)
 P. O. Box 1492, El Paso, TX 79978
 If well produces oil or liquids, give location of tanks:
 Unit: B Sec: 14 Twp: 23N Rqs: 5W
 Is gas actually connected? No 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: 9/14/84 Date Compl. Ready to Prod.: 11/25/84 Total Depth: 6800 P.B.T.D.: 6793
 Elevations (DF, RKB, RT, GR, etc.): 6755' GR Name of Producing Formation: Gallup-Semilla-Greenhorn Top Oil/Gas Pay: 5306 Tubing Depth: 6509
 Perforations: 5306-5733, 6178-6221, 6437-6466 Depth Casing Shoe: 6793

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	9-5/8" casing	273	256' ³
8-3/4"	7" casing	4554	659' ³
6 1/2"	4 1/2" liner	4418-6793	421' ³
	2-3/8" tubing	6509	

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: Choke Size:
 Actual Prod. During Test: Oil-Bbls.: Water-Bbls.: Gas-MCF:
 RECEIVED
 JUL 28 1986
 OIL CON. DIV.
 DIST. 3

GAS WELL

Actual Prod. Test-MCF/D: Length of Test: Bbls. Condensate/MMCF: Gravity of Condensate:
 Testing Method (pilot, 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.

Kathy Cayten
 Kathy Cayten (Signature)
 Engineering Assistant (Title)

7/24/86 (Date)

OIL CONSERVATION DIVISION

APPROVED: JUL 23 1986
 BY: *Frank J. [Signature]*
 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 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.