

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Morrison Oil & Gas Corporation

Address
P. O. Box 840, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of:
☐ Recompletion	☐ Oil
☐ Change in Ownership	☐ Casinghead Gas
	☐ Dry Gas
	☐ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla 429	Well No. 4	Pool Name, including Formation Undes. Gallup	Kind of Lease State, Federal or Fee Indian	Lease No. 429
Location Unit Letter <u>I</u> : <u>1850</u> Feet From The <u>South</u> Line and <u>790</u> Feet From The <u>East</u> Line of Section <u>24</u> Township <u>23N</u> Range <u>5W</u> , NMPM, <u>Sandoval</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

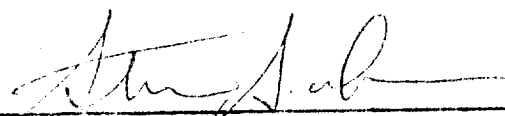
Name of Authorized Transporter of Oil ☒ or Condensate ☐ The Mancos Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1320, Farmington, New Mexico 87499	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Unknown	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 24
	Twp. 23N	Rge. 5W
	Is gas actually connected? No	When As soon as possible

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.


(Signature)
Steve R. Dunn, Operations Manager
(Title)
5/30/85
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 31 1985, 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 newly 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.

IV. COMPLETION DATA

Designate Type of Completion - (X)

Oil Well ☒ Gas Well ☒ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Some Res'ty. ☐ Diff. Res'ty. ☐

Date Spud 3/26/85

Date Compl. Ready to Prod. 5/18/85

Total Depth 6400' KB

P.B.T.D. 6353' KB

Elevations (D.F., RKB, RT, CR, etc.)

Name of Producing Formation Gallup

Top Oil/Gas Pay 4756' KB

Tubing Depth 5878' KB

Perforations 6322 - 5332, 5446, 5448, 5463, 5465, 5479, 5481, 5505, 5526

5621, 5623, 5643, 5656, 5666, 5822, 5824, 5826, 5840, 5853, 5141 - 44,

Depth Casing Shoe 6395

TUBING, CASING, AND CEMENTING RECORD

4817 - 19, 4790 - 93, 4756 - 69

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

12-1/4

8-5/8", 24 #/ft. J-55

220' KB

175 SK (206.5 cu. ft.)

7-7/8"

4-1/2", 10.5 #/ft. J-55

6395' KB

1100 SK (1930 cu. ft.)

2-3/8"

5878' KB

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 24 hours)

Date First Flow Oil Run To Tanks

Date of Test 5/30/85

Producing Method (Flow, pump, gas lift, etc.) Pumping

Length of Test

Tubing Pressure 150

Casing Pressure 150

Choke Size 3/4

Actual Press. During Test

Oil-Bbls. 36

Water-Bbls. 0

Gas-MCF 86.3

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

GAS WELL