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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes Old C-104 and C-110
 Effective 1-1-65

B.K.

I. Operator
 Kenai Oil and Gas Inc.

Address
 717 17th Street, Suite 2000, Denver, Colorado 80202

Reason(s) for filing (Check proper box) Other (Please explain)

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

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name UNION NAVAJO ALLOTTED 5	Well No. #21	Pool Name, including Formation Nageezi-Gallup	Kind of Lease State , Federal or State	Lease No. NOO-C-14-20-3743
Location Unit Letter <u>C</u> <u>790</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u>				
Line of Section <u>5</u> Township <u>23 North</u> Range <u>8 West</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Inland Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1528, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Nageezi Gallup Gas System	Address (Give address to which approved copy of this form is to be sent) 717 17th St., Ste. 2000, Denver, CO 80202
If well produces oil or liquids, give location of tanks.	Unit: <u>C</u> Sec: <u>5</u> Twp: <u>23N</u> Rge: <u>8W</u> Is gas actually connected? <u>Yes</u> When: <u>5/20/81</u>

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 <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'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 3/16/80	Date Compl. Ready to Prod. 5/22/80	Total Depth 6405'	P.B.T.D. 5355'					
Elevations (DF, RKB, RT, GR, etc.) 6989'KB; 6975'GL	Name of Producing Formation Gallup	Top Oil/Gas Pay 5273'	Tubing Depth 5133.54'KB					
Perforations 5148-50'; 5163-65'; 5240-43'; 5271-73' (14 holes)							Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	573'	450 sxs					
7-7/8"	4-1/2"	6414'	850 sxs in 2 stages					
Tbg:	2-3/8"	5133.54'KB						

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 6/12/80	Date of Test 6/13/80	Producing Method (Flow, pump, gas lift, etc.) Flowing w/plunger lift	
Length of Test 24	Tubing Pressure 275	Casing Pressure 430	Choke Size 3/4"
Actual Prod. During Test	Oil - Bbls. 8	Water - Bbls. 2	Gas - MCF 31

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Joseph R. Magala
 (Signature)
 Vice President of Exploration
 (Title)
 May 22, 1981
 (Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 26 1981, 19
 BY Original Signed by FRANK 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 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.