

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I. GEORGE H. FENTRESS TO TRANSPORT OIL AND NATURAL GAS

Operator P. O. BOX 113 Well API No. 3003390521000 S1

Address WHEAT RIFGE, COLORADO 80034-0113

Reason(s) for Filing (Check proper box) ☒ Other (Please explain) and change in ownership, (Fentress with majority interest)
New Well ☐ Change in Transporter of: ☐ Dry Gas ☒
Recompletion ☐ Oil ☐ Casinghead Gas ☐ Condensate ☐
Change in Operator ☒

If change of operator give name and address of previous operator George A. Bernat, 320 Morningside Dr., Sarasota, Fla. 34236

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla-Abel Well No. #2 Pool Name, including Formation Ballard Pictured Cliffs Kind of Lease State, Federal or Fee Jic. Cont Lease No. 317
Location Unit Letter I 1850 Feet From The S Line and 1092 Feet From The E Line
Section 31 Township 24 N Range 4 W NMPL Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Natural
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
El Paso Gas Company Box 1492, El Paso, Tex. 79978
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When? Initially or
yes 12/26/84

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	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoes		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 the well for 24 hours.)
Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift)
Length of Test Tubing Pressure Casing Pressure
Actual Prod. During Test Oil - Bbls. Water - Bbls.
RECEIVED AUG 26 1992 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. OPERATOR 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.

Signature George H. Fentress
GEORGE H. FENTRESS, OPERATOR
Printed Name August 14, 1992 (303) 423-3938
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 26 1992
By Samuel J. [Signature]
SUPERVISOR DISTRICT #3
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.