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U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL G A S	/	-	
OPERATOR		2		
PRORATION OFFICE				
(perator				
Address]	
Reason(s) for filing	(Check	prope	rbos	
Hew Well	X			
Recompletion				
Change in Ownership				
If change of owners		e na: wner		

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

	FILE / /		AND	CAS CAS			
	LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS A.			
	TRANSPORTER OIL						
	GAS						
	OPERATOR 2	-					
I.	PRORATION OFFICE						
	BOLACK-GREER, INC.						
	158 Petroleum Center Building, Farmington, New Mexico						
	Reason(s) for filing (Check proper box		Other (Please explain)	MI HOW HOWLOO			
	Hew Well	Change in Transporter of:					
	Recompletion	Oil Dry Ga	s 🔲				
	Change in Ownership	Casinghead Gas Conden	sate				
	If change of ownership give name						
	and address of previous owner						
11.	DESCRIPTION OF WELL AND	LEASE					
	Lease Name		ne, Including Formation	Kind of Lease State, Federal or Fee Federal			
	CANADA OJITOS UN	VIT 23 1-5 Puer	to Chiquito Gallup	State, redetal of ree Federal			
	n 60	Feet From The north Lin	e and 620 Feet From	n The east			
	Unit Letter A ; OC	Feet From The HOT UK					
	Line of Section 23 , To	ownship 25N Range	lw , nmpm,	Rio Arriba County			
		AMED OF ON AND NATIVEAL CA	G.				
III.	Name of Authorized Transporter of Oi	TER OF OIL AND NATURAL GA	Address (Give address to which appr	roved copy of this form is to be sent)			
	Shell Oil Comp		Box 1588, Farmin	gton, New Mexico			
	Name of Authorized Transporter of Co	asinghead Gas or Dry Gas	Address (Give address to which appr	roved copy of this form is to be sent)			
		None					
	If well produces oil or liquids,	Unit Sec. Twp. Rge. A 23 25 N 1W	Is gas actually connected?	/hen			
	give location of tanks.		<u> </u>				
	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA						
- • •	Designate Type of Completi	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
			Total Depth	P.B.T.D.			
	Date Spudded 9-9-64	Date Compl. Ready to Prod. 2–21–65	7313	6433			
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Puerto Chiquito	Gallup	6352	4728			
	Perforations 6350-6370', 4 jet shots per foot 7234'						
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	17-1/4"	13-3/8"	323	400			
	9-7/8"	7-5/8"	5549	400			
	6-3/4"	5-1/2" (liner)	7234	275			
		2-7/8"	4728	-			
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 allow able 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.)			
	4-21-65	4-22-65	Pump				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	24 hours	Oil-Bbls.	Water-Bbls.	Sas-MCF			
	Actual Prod. During Test	145	O/RILTI	56.5			
			- JALULI	LD			
	GAS WELL APR 2.2 1000						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensati/MMCF	35 Bravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	COM Choke Size			
	resting Method (proce, out to pro)	rubing resoure	Casing Pressure DIST.	3			
VI	CERTIFICATE OF COMPLIAN	NCF	OIL CONSERV	ATION COMMISSION			
∀1 .	AND		APR 2 3 1965				
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED, 19				
	Commission have been complied	with and that the information given					
above is true and complete to the best of my knowledge and belief.			,				
	1 1	// / .	TITLE Supervisor Dist. # 3				
	- 11/1/-/		This form is to be filed in	n compliance with RULE 1104.			
6	11/11/14	Toller -	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				
	Engine	nature)	tests taken on the well in acc	cordance with RULE 111.			
		EGF ^itle)	All sections of this form t	nust be filled out completely for allow-			
	(2	,	able on new and recompleted wells.				

April 22, 1965

(Date)

Fill out Sections I, II, III, and VI only 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.