

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

OIL CONSERVATION DIVISION

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator NM&O OPERATING COMPANY		Well API No.
Address 22 WEST 4TH STREET, SUITE 900, TULSA, OK 74103		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name KOON	Well No. #1	Pool Name, including Formation BASIN FRUITLAND COAL	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter P : 990 Feet From The SOUTH Line and 990 Feet From The EAST Line Section 14 Township 25N Range 2W , NMPM, RIO ARRIBA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> of Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
EL PASO NATURAL GAS	P. O. BOX 990, FARMINGTON, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 14
	Twp. 25N	Rge. 2W
	Is gas actually connected? Yes When? 1950's	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Date Spudded 7-17-92	Date Compl. Ready to Prod. 4-22-92	Total Depth 3,490'		P.B.T.D. 3,410				
Elevations (DP, RKB, RT, GR, etc.) 7,333 GR	Name of Producing Formation BASIN FRUITLAND COAL	Top Oil/Gas Pay 3322		Tubing Depth 3,382		3,380		
Perforations 3322 - 3390				Depth Casing Shoe 3,425'				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 5/8	10 3/4 40#		87' 92		85 REG 65 SX			
8 3/4	7" 20#		3,425'		90 REG			
	2 7/8 N-806.5#		3380		3,380			

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water Bbls.
		APR 24 1992

GAS WELL

Actual Prod. Test - MCF/D 60	Length of Test 48 HOURS	Bbls. Condensate/DST. 3	Gravity of Condensate
Testing Method (pilot, back pr.) BACK PRESSURE	Tubing Pressure (Shut-in) 475#	Casing Pressure (Shut-in) 485#	Choke Size F0

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 **CHARL PHILLIPS**
Printed Name **CHARL PHILLIPS**
Date **4-22-92**
Title **VP**
Telephone No. **784-584-3802**

OIL CONSERVATION DIVISION

Date Approved **AUG 05 1992**

By **ORIGINAL SIGNED BY ERNIE BUSCH**

Title **DEPUTY OIL & GAS INSPECTOR, DIST. #3**

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.