

Submit: 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator: Chace Oil Company, Inc. Well API No. 30 039 23222
Address: 313 Washington SE, Albuquerque, New Mexico 87108
Reason(s) for Filing (Check proper box):
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☒ Dry Gas ☐ Effective: June 3, 1989
Change in Operator ☐ Casinghead Gas ☐ Condensate ☐
If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE
Lease Name: Jicarilla 70 Well No. 17 Pool Name, Including Formation: South Lindrith Gallup-Dakota Kind of Lease: Indian State, Federal or Fee: Lease No. 70
Location: Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line
Section 34 Township 24N Range 4W, NMPM, 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): P. O. Box 256, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent): P. O. Box 1492, El Paso, TX 79978
If well produces oil or liquids, give location of tanks: Unit G Sec. 34 Twp. 24N Rge. 4W Is gas actually connected? yes When? 8/24/84

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 Taking Depth
Performances Depth Casing Shoe
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 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.
RECEIVED MAY 24 1989 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: Frank A. Welker, Vice President Production
Printed Name: Frank A. Welker, Vice President Production
Date: 5/19/89 Telephone No. 505/266-5562

OIL CONSERVATION DIVISION
Date Approved: MAY 24 1989
By: [Signature]
Title: SUPERVISION DISTRICT # 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.
Form C-104 must be filed for each pool in multiply completed wells.