

5 NMOCD 1 DE 1 Gary Refining 1 File 2 NWPL

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
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FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
JEROME P. McHUGH

Address
P O Box 809, Farmington, NM 87499

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> 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

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name High Adventure	Well No. 2	Pool Name, including Formation Gavilan Mancos	Kind of Lease State, Federal or Fee	Lease No. ---
Location Unit Letter <u>M</u> ; <u>790</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>West</u>				
Line of Section <u>9</u> Township <u>25N</u> Range <u>2W</u> , NMPM, <u>Rio Arriba</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"/> Gary Refining, Inc.	Address (Give address to which approved copy of this form is to be sent) P O Box 159, Bloomfield, NM 87413			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Jerome P. McHUGH	Address (Give address to which approved copy of this form is to be sent) P O Box 809, Farmington, NM 87499			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 9	Twp. 25N	Rge. 2W
	Is gas actually connected?		When 1/22/87	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

James S. Hazen
Field Supt.
(Signature)

(Title)

2/20/87

(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 23 1987
BY Original Signed by CHARLES GHOLSON
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9/11/86	Date Compl. Ready to Prod. 2/11/87		Total Depth 8270' KB		P.B.T.D. 8211'				
Elevations (DF, RKB, RT, CR, etc.) 7315' GL	Name of Producing Formation Mancos		Top Oil/Gas Pay 7002'		Tubing Depth 7174' KB				
Perforations 7002-7129'							Depth Casing Shoe 8261' KB		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4"	9-5/8"		256' KB		177 cf				
7-7/8"	5-1/2"		8261' KB		2645 cf in 3 stages				
	2-7/8"		7174' KB						

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 11/19/86	Date of Test 2/12/87	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 22 hrs.	Tubing Pressure 150 psi	Casing Pressure 150 psi	Choke Size 1"
Actual Prod. During Test	Oil-Bbls. 120 BOPD	Water-Bbls. 4 BWPD	Gas-MCF 285 MCFGPD

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