

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.L.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
JACK A. COLE
Address
P. O. BOX 191, FARMINGTON, NEW MEXICO 87499

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership
Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)
Request for approval to sell gas while recovering frac oil.
Gas connection

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Marcus	Well No. 10	Pool Name, including Formation Lybrook Gallup	Kind of Lease Federal	Lease No. SF-080202B
Location Unit Letter H : 1685 Feet From The North Line and 520 Feet From The East Line of Section 35 Township 24N Range 7W , 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)
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico	P.O. Box 1899, Bloomfield, N.M. 87413
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
H 35 24N 7W	Yes 7-10-87

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

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.

Dwayne Blancett
DEWAYNE BLANCETT
(Signature)
PRODUCTION SUPERINTENDENT
(Title)
July 9, 1987
(Date)

OIL CONSERVATION DIVISION
JUL 10 1987
APPROVED
BY **Original Signed by FRANK T. CHAVEZ**
TITLE **SUPERVISOR DISTRICT # 2**
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.

JUL 10 1987
OIL CON. DIV.
DIST. 3

V. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Reservoir	Diff. Reservoir
Date Spudded 6-13-87	Date Compl. Ready to Prod. 7-7-87	Total Depth 5640		P.B.T.D. 5591					
Deviation (DF, RKB, RT, GR, etc.) 6791 GR 6805 KB	Name of Producing Formation Gallup	Top Oil/Gas Pay 5286		Tubing Depth 5433					
Perforations 5286-5296, 5413-5424, 5450-5452, 5474-5484							Depth Casing Shoe 5635		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8, 24.0 lb. J-55	277	250 sks. 295 cu. ft.
7 7/8	4 1/2, 10.50 lb. K-55	5635	925 sks. 1911 cu. ft.
	2 3/8	5433	

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)

First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Producing to recover frac-oil	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Initial Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Sealing Method (pilot, back pt.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size