

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator M.R. Schalk		Well API No.
Address P.O. Box 25825, Albuquerque, N.M. 87125		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change in Transporter of:	
Recompletion ☐	Oil ☒ Dry Gas ☐	RECEIVED MAR 05 1991 OIL CON. DIV. DIST. 3
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 Schalk Briny	Well No. 1	Pool Name, including Formation West Lindrith GL/DK	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter I : 2310 Feet From The South Line and 330 Feet From The East Line Section 34 Township 25N Range 3W NMPM Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Giant Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 9156, Phoenix, AZ 85068	
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ E1 Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4990, Farmington, N.M. 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	I	34
	Twp.	Rge.
	25	3
If this production is commingled with that from any other lease or pool, give commingling order number:	Is gas actually connected?	When?
	yes	10/89

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 4-24-89	Date Compl. Ready to Prod. 6-19-89	Total Depth 8139'
Elevations (DF, RKB, RT, GR, etc.) GR 7158'	Name of Producing Formation Dakota	Top Oil/Gas Pay 7945'
Perforations 7945' - 7970'		P.B.T.D. 8170'
		Tubing Depth 7939'
		Depth Casing Shoe 8139'

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE 9 5/8	CASING & TUBING SIZE 36" K-55	DEPTH SET 255'	SACKS CEMENT 220
4 1/2	11.6" N-75	8139'	1250

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 7-1-89	Date of Test 7-1-89	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure 50	Casing Pressure 50	Choke Size
Actual Prod. During Test	Oil - Bbls. 17	Water - Bbls. 40	Gas - MCF 17

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 Steve Schalk Agent
Printed Name Steve Schalk
Date March 4, 1991 Telephone No. (505) 881-6649

OIL CONSERVATION DIVISION

Date Approved **MAR 05 1991**

By Steve Schalk
Title **SUPERVISOR 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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.