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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

B.K.

Operator GEORGE COLEMAN	
Address P. O. Box 1915, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
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 <input type="checkbox"/>

If change of ownership give name and address of previous owner

N00-C-14-20-3586

II. DESCRIPTION OF WELL AND LEASE		Lease No.
Lease Name Dry Creek	Well No. 1 Pool Name, Including Formation Bisti-Lower Gallup	Kind of Lease State, Federal or Fee Ind.
Location Unit Letter I ; 1650 Feet From The South Line and 1180 Feet From The East		
Line of Section 5 Township 24 N. Range 10 W. , NMPM, San Juan County		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation		P. O. Box 1183, Houston, Tx. 77001	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.		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 I Sec. 5 Twp. 24N Rge. 10W	Is gas actually connected? Yes	When 10-20-1975

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

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)			X	X					
Date Spudded 6-6-74	Date Compl. Ready to Prod. 2-21-1975	Total Depth 6231'		P.B.T.D. 5180'					
Elevations (DF, RKB, RT, GR, etc.) 6776 GR	Name of Producing Formation Gallup	Top Oil/Gas Pay 5146'		Tubing Depth 5150'					
Perforations 5146' - 5152'				Depth Casing Shoe 5180'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
12 1/4"	8 5/8"	620'		300 sacks					
7 7/8"	5 1/2"	5180'		550 sacks					
	2 3/8"	5150'							

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
		001 21 1975	
		OIL CON. COM. DIST. 3	
GAS WELL			
Actual Prod. Test-MCF/D 222	Length of Test 24	Bbls. Condensate/MMCF 2	Gravity of Condensate 39
Testing Method (pitot, back pr.) 2" orifice	Tubing Pressure (shut-in) Pumping	Casing Pressure (shut-in) 28#	Choke Size 1/2"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

George E. Coleman
Operator
October 20, 1975
(Date)

OIL CONSERVATION COMMISSION	
APPROVED _____, 19____	
BY <u>H. E. Waples</u>	
TITLE _____	
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.	