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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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.

I. Operator
COLEMAN OIL & GAS, INC.

Address
c/o W. M. Gallaway, 101-2 Petroleum Plaza Bldg., Farmington, New Mexico 87401

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo Wood	Well No. 1	Pool Name, Including Formation Bisti Gallup	Kind of Lease Navajo Allot.	Lease No. N00-C-14-20-3588
Location Unit Letter A ; 800 Feet From The North Line and 890 Feet From The East Line of Section 6 Township 24N Range 10W, NMPM, San Juan 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"/> The Permian Corporation Permian (Eff. 9/1/87)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. A 6 24N 10W Is gas actually connected? When No As soon as possible

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

N/A

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 1-27-1981	Date Compl. Ready to Prod. 2-21-1981		Total Depth 5349' K.B.		P.B.T.D. 5334' K.B.			
Elevations (DF, RKB, RT, CR, etc.) 6799' GR	Name of Producing Formation Bisti Gallup		Top Oil/Gas Pay 5166'		Tubing Depth 5166'			
Perforations								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		OIL SACKS CEMENT			
12 1/2"	8 5/8"		224' K.B.		125 sacks - 1st stage			
7 7/8"	4 1/2"		5348.51' K.B.		200 sacks - 1st stage, 350 sacks - second stage			

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 3-1-1981	Date of Test 3-1-1981	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 3 hours	Tubing Pressure TSTM Pumping	Casing Pressure 833	Choke Size 1 1/2"
Actual Prod. During Test 1/4 bbl.	Oil-Bbls. 1/4 bbl.	Water-Bbls. TSTM	Gas-MCF 19 MCF

GAS WELL

Actual Prod. Test-MCF/D 154	Length of Test 3 hours	Bbls. Condensate/MMCF 14	Gravity of Condensate 39
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) Pumping	Casing Pressure (shut-in) 833	Choke Size 1 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.

COLEMAN OIL & GAS, INC.

By: W. M. Gallaway
(Signature) W. M. Gallaway
Engineer

March 2, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT # 3

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.