DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 ANTA FE Supersedes Old C-104 and C-11 Effective 1-1-65 REQUEST FOR ALLOWABLE ILE J.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE Kenai Oil and Gas Inc. 717 17th Street, Suite 2000, Denver, CO 80202 Reason(s) for filing (Check proper box) Other (Please explain) New Well Recompletion Oil Dry Gas Change in Ownership Condensate If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Kind of Lease Lease No State of New Mexico-36 43 Lybrook Gallup Ext. State, **KRYXXXXXXX** L-2086 Location 1780 South 350 East Unit Letter Feet From The Feet From The 36 24N 8W Township Range San Juan Line of Section , NMPM. County HI. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | Name of Authorized Transporter of Oil (A) | or Condensate | | Address (Give address to which approved copy of this form is to be sent) Inland Corp. P.O. Box 1528, Farmington, NM 87401 Name of Authorized Transporter of Casinghead Gas $\stackrel{\textstyle \star}{X}$ or Dry Gas Address (Give address to which approved copy of this form is to be sent) Gas Company of NM (Div. of Southern Union) 1800 1st International Bldg., Dallas, TX 75270 Is gas actually connected? Unit If well produces oil or liquids, 36 24N 8W 9/22/81 Yes C 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 Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) X Χ Date Compl. Ready to Prod. Date Spudded Total Depth 4/28/81 8/11/81 57381 5626! Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Oll/Gas Pay Tubing Depth 6937'GL; 6951'KB Lower & Upper Gallup 5449-55661; 5325-53611 5572.741 Perforations 5450,52,53,54,56; 5523,25,27,29,31;5561,63,65; 5449-58;5522-33; Depth Casing Snce 5560-66;5326,27,29,38,39,41,43,56,57,58,60; 5325-31;5337-34; 5355-61'. 5738'KB TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12-1/4" 8-5/8" 304 **'** KB 275 sxs 7-7/8" 5738'KB 5-1/2" 1125 sxs 2-3/8" 5572.741

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) OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) 9/22/81 9/22/81 Flowing ubing Pressure Casing Pressure Choke Size 24 hrs 550 20/64" 200 Actual Prod. During Test Oil-Bhis. Water - Bbls. Gas - MCF

105 2 120

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
			<u> </u>
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

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	011l - D
	(Signature)
	(SigKature)
	Manager of Operations
	(Title)
	September 29, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED		JCT ; 1981	
BY	Original Signed by FRANK T.		
TITLE	SUPERVISOR DISTRICT # 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. Conserve Rorms C-10d must be filed for such sool in multiply