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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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



Operator Kenai Oil and Gas Inc.	
Address 717 17th Street, Suite 2000, Denver, CO 80202	
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico State	Well No. #3	Pool Name, including Formation Nageezi Gallup	Kind of Lease State, <del>FARMINGTON</del>	Lease No. L-2986
Location				
Unit Letter G	1650	Feet From The North	Line and 1650	Feet From The East
Line of Section 32	Township 24N	Range 8W	, 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"/> Inland Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1528; Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Gas Company of NM (Div. of So. Union Co.)	Address (Give address to which approved copy of this form is to be sent) 1800 1st International Bldg., Dallas, TX 75270					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 32	Twp. 24N	Rge. 8W	Is gas actually connected? Yes	When 8/5/81

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5/11/81	Date Compl. Ready to Prod. 7/7/81		Total Depth 5700'		P.B.T.D. 5663'			
Elevations (DF, RKB, RT, GR, etc.) 7010'GR: 7022'KB	Name of Producing Formation Lower & Upper Gallup		Top Oil/Gas Pay 5654-5528'; 5482-5277'		Tubing Depth 5666.44'			
Perforations SEE ATTACHED COMPLETION HISTORY.					Depth Casing Shoe 5703'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		300'KB		275 sxs			
7-7/8"	5-1/2"		5703'KB		2 stages: 1150 sxs total			
	2-3/8"		5666.44'					

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 8/11/81	Date of Test 8/31/81	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 125	Casing Pressure 750	Choke Size 3/4"
Actual Prod. During Test	Oil-Bbls. 70	Water-Bbls. 1	Gas-MCF 167

40  
GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
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.

(Signature)

Manager of Production

September 8, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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.