

DISTRIBUTION	
ALTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104  
Supersedes Old C-101 and C-110  
Effective 1-1-65

*JS*

Operator  
Kenai Oil & Gas, Inc.

Address  
717 17th St. Suite 2000, Denver, CO 80202

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		Other (Please explain)	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Condensate	<input type="checkbox"/>	Gas	<input type="checkbox"/>

If change of ownership give name and address of previous owner:

I. DESCRIPTION OF WELL AND LEASE

Lease Name State of New Mexico 36	Well No.; Pool Name, including Formation 36-12 Lybrook - Gallup Ext	Kind of Lease State, Federal or Fee State	Lease No. L2986
Location Unit Letter E; 1850 Feet From The North Line and 1120 Feet From The West			
Line of Section 36 Township 24N Range 8W, NMPM, County			

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Southern Union Refining Company	Address (Give address to which approved copy of this form is to be sent) 1800 First International Bldg, Dallas, Texas		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Mesa Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Box 2009, One Mesa Square, Amarillo, TX 79133		
If well produces oil or liquids, give location of tanks.	Unit C Sec. 36 Twp. 24N Rge. 8W	Is gas actually connected? no	When 2-12-82

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Rest. <input type="checkbox"/> Diff. Rest. <input type="checkbox"/>		
Date Spudded 11-2-81	Date Compl. Ready to Prod. 1-15-82	Total Depth 5700'	P.B.T.D. 5660'
Elevations (DF, RKB, RT, GR, etc.) 6856' GR	Name of Producing Formation Gallup	Top Oil/Gas Pay 5234'	Tubing Depth 5649' KB
Perforations 5340'-44', 5274'-84', 5264'-70', 5234'-39', 5392'-5400', 5559'-65', 5630'-40', 5601'-06', 5590'-94', 5542'-46', 5498'-5502', 5464'-68'			Depth Casing Shoe 5700' KB
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8", 23#	DEPTH SET 274' KB	SACKS CEMENT 200SXS
7 7/8"	4 1/2", 9.5#	5700' KB	1400SXS
	2 3/8	5649'	

VI. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead oil and must be equal to or exceed test available for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 12-13-81	Date of Test 1-15-82	Producing Method (Flow, pump, gas lift, etc.) flowing, swabbing	
Length of Test 3 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 16 Bbls.	Water - Bbls. 0	Gas - MCF 19 MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Basic Oil/Gas Ratio	Gravity of Condensate
Testing Method (Pilot, Jack pot)	Tubing Pressure (inches-in)	Casing Pressure (inches-in)	Choke Size

III. 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.

*D. S. Shoop*  
(Signature)  
Manager of Operations  
(Title)  
February 11, 1982  
(Date)

RECEIVED  
FEB 16 1982  
OIL CONSERVATION COMMISSION  
DIST. 3  
APPROVED  
Original Signed by CHARLES GHOLSON  
BY DEPUTY OIL & GAS INSPECTOR, DIST. #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 dev. tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for all wells on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions.  
Separate Forms C-104 must be filed for each pool in which