Y AND MINERALS DEPARTMENT

UP I WIS INVITED			
	1760		
DISTRIBUTION			
SANTA FE			
FILE			
v.s.u.s.		_	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
		i _	

III.

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND

OPERATOR	AUTHORIZATION TO TRANSPO	ORT OIL AND NATURAL GAS		
PROBATION OFFICE				
Operator	• -			
Caulkins Oi	1 Company			
Address				
	O Farmington, New Mexico	100		
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 Condens	tate KX		
d the same of an arms to a same				
f change of ownership give name and address of previous owner	<u> </u>			
•				
DESCRIPTION OF WELL AND L	EASE.	rmation Kind of Leas	Lease No.	
Lease Name	Well No.; Pool Name, including rol	State Federa	_	
Breech "E"	104 Otero Chacra-Bla	anco Mesa Verde State, Federa	or Fee Federal NM 03551	
Location			South	
Unit Letter P : 66	O Feet From The East Line	and 660 Feet From	The South	
			A constitue	
Line of Section 5 Town	nship 26 North Range	6 West , NMPM, Ric	Arriba County	
DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	3		
Name of Authorized Transporter of Oil	or Condensate 🗓	Vadiess (Othe address to mutch abbio		
Giant Refinery		P.O. Box 256 Farmi	.ngton, New Mexico	
Name of Authorized Transporter of Cast	Inghead Gas or Dry Gas 📉	Address (Give address to which appro		
	of New Mexico	1508 Pacific Ave.		
er il andreas all as liquids	Unit Sec. Twp. Rge.	Is gas actually connected? Wh		
If well produces oil or liquids, give location of tanks.	P 5 26 N 6 W	Yes	9-27-78	
	h that from any other lease or pool, q	zive commingling order number:	R-5647	
If this production is commingled with	that from any other rease or poor,			
COMPLETION DATA	Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Resty. Diff. Rest	
Designate Type of Completion	n = (X)	1 1	1 1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
10-19-58	8-31-78	6746 '	5490 '	
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
6505 GR	Chacra-Mesa Verde	3887 '	5102'	
	GREETE NOTE (GEO.		Depth Casing Shoe	
Perforations	7' (Chacra) 5034' - 5	352' (Mesa Verde)	6746'	
3007 303	. (011111)	CEMENTING RECORD		
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
HOLE SIZE 15 1/4"	10 3/4"	4541	360	
	7"	6746'	675	
8 3/4"	1 1/4"	5102'		
	1 1/4	3232		
		t	l and must be equal to or exceed top allo	
TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be af	pth or be for full 24 hours)	. Will have be equal to a model to p	
OIL WELL	Date of Test	Producing Method (Flow, pump, gas i	ift, etc.)	
Date First New Oil Run To Tanks	54.6 0. 1001			
	Tubing Preseure	Casing Pressure	Calle Street	
Length of Test	Tubing Piessau			
	lou phi	Water-Bble.	Gas-MCF	
Actual Prod. During Test	Oil-Bhis.			
	<u> </u>			
GAS WELL		Bbis. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bais. Condendate, mine.		
570	3 Hours	Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shnt-in)	•	3/4"	
Back Pressure	1083	1198		
CERTIFICATE OF COMPLIAN	CE	·	TION DIVISION	
•		AUG 1/2	1983	
I hereby certify that the rules and	regulations of the Oil Conservation	BY Stranks		
	and that the information gives			
shove is true and complete to the	s best or my knowledge and better.			
	_	TITLE SUPERVISOR DISTORT & 5		
	7	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviation of the well in accordance with RULE 111.		
////	()			
1 Australia 6	ature)			
• •				
Superinten		All sections of this form a	nust be filled out completely for allowells.	
	tle)	able on new and recompleted	and the state of owner	

Fill out only Sections I. II. III. and VI for changes of owne well name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filed for each pool in multip completed wells.

8-8-83

(Date)