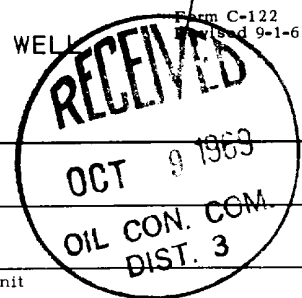


NEW MEXICO OIL CONSERVATION COMMISSION
MULTIPOINT AND ONE POINT BACK PRESSURE TEST FOR GAS WELL

Form C-122
Revised 9-1-65



Type Test <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Annual <input type="checkbox"/> Special				Test Date 8/22/69																																																																																															
Company J. Gregory Marrion & R. L. Bayless				Connection El Paso Natural Gas Company																																																																																															
Pool Undesignated				Unit Chacara																																																																																															
Completion Date 8/7/69		Total Depth 3350 KB		Plug Back TD 3281 KB																																																																																															
Elevation 6226 KB		Farm or Lease Name Fields Com																																																																																																	
Csg. Size 2 7/8"	Wt. 6.5	Set At 3325	Perforations: From 3170 To 3190		Well No. 1																																																																																														
Tbg. Size None	Wt. -	Set At -	Perforations: From - To -		Unit Sec. Twp. Rge. C 31 26N 6W																																																																																														
Type Well - Single - Bradenhead - G.G. or G.O. Multiple Single - Tubingless				Packer Set At None																																																																																															
Producing Thru Casing				Baro. Press. - P _a 12																																																																																															
Reservoir Temp. °F 110		Mean Annual Temp. °F 60		County Rio Arriba																																																																																															
State New Mexico		Meter Run 3180																																																																																																	
L 3180	H 3180	Gg 0.7 est	% CO ₂	% N ₂	% H ₂ S																																																																																														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th align="center" colspan="6">FLOW DATA</th> <th align="center" colspan="2">TUBING DATA</th> <th align="center" colspan="2">CASING DATA</th> <th align="center" rowspan="2">Duration of Flow</th> </tr> <tr> <th>NO.</th> <th>Prover Line Size</th> <th>X</th> <th>Orifice Size</th> <th>Press. p.s.i.g.</th> <th>Diff. h_w</th> <th>Temp. °F</th> <th>Press. p.s.i.g.</th> <th>Temp. °F</th> <th>Press. p.s.i.g.</th> <th>Temp. °F</th> </tr> <tr> <td>SI</td> <td>8 days</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>727</td> <td></td> <td></td> </tr> <tr> <td>1.</td> <td>2"</td> <td></td> <td>3/4</td> <td>190</td> <td></td> <td></td> <td></td> <td></td> <td>190</td> <td>60° est</td> <td>3 hrs</td> </tr> <tr><td>2.</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>3.</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>4.</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>5.</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>						FLOW DATA						TUBING DATA		CASING DATA		Duration of Flow	NO.	Prover Line Size	X	Orifice Size	Press. p.s.i.g.	Diff. h _w	Temp. °F	Press. p.s.i.g.	Temp. °F	Press. p.s.i.g.	Temp. °F	SI	8 days								727			1.	2"		3/4	190					190	60° est	3 hrs	2.												3.												4.												5.											
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5.																																																																																																			
RATE OF FLOW CALCULATIONS																																																																																																			
NO.	Coefficient (24 Hour)	$\sqrt{h_w P_m}$	Pressure P _m	Flow Temp. Factor Ft.	Gravity Factor Fg	Super Compress. Factor, Fpv	Rate of Flow Q, Mcfd																																																																																												
1.	12.365		202	1.000	0.9258	1.025	2775																																																																																												
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5.																																																																																																			

NO.	P _t	Temp. °R	T _r	Z	Gas Liquid Hydrocarbon Ratio _____ Mcf/bbl.
1.					A.P.I. Gravity of Liquid Hydrocarbons _____ Deg.
2.					Specific Gravity Separator Gas _____ X X X X X X X X
3.					Specific Gravity Flowing Fluid _____ X X X X X
4.					Critical Pressure _____ P.S.I.A. _____ P.S.I.A.
5.					Critical Temperature _____ R _____ R

NO.	P _t ²	P _w	P _w ²	P _c ² - P _w ²
1				
2				
3				
4				
5				

(1) $\frac{P_c^2}{P_c^2 - P_w^2} = \frac{546,121}{469,915} = 1.162$ (2) $\left[\frac{P_c^2}{P_c^2 - P_w^2} \right]^n = 1.119$

AOF = Q $\left[\frac{P_c^2}{P_c^2 - P_w^2} \right]^n = 3105$

Absolute Open Flow _____ Mcfd @ 15.025		Angle of Slope θ _____	Slope, n 0.75
Remarks: Pc=5.551 GL=2226 1-e-s = .149 Pw @ 276			
Approved By Commission:	Conducted By: Merle Ellsasser	Calculated By: J. G. Marrion <i>[Signature]</i>	Checked By: R. L. Bayless

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	1
OPERATOR		7
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

I. Operator **MERRION & BAYLESS**

Address **Box 1541, Farmington, New Mexico**

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
Fields Com	(NM 014058)	1	Undesig Chacra	State, Federal or Fee Federal
Location				
Unit Letter	F	1430 Feet From The	W Line and 1700 Feet From The	N
Line of Section	31	Township	26 N	Range 6W , NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					Yes	October 30, 1969

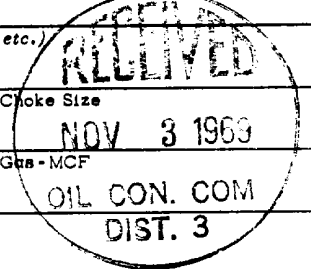
If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
		X						
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
July 10, 1969	August 10, 1969		3321		3293			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
6216 GL	Chacra		3170		none			
Perforations					Depth Casing Shoe			
3170 - 90					3325			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
9 7/8	7 5/8		100		100			
6 3/4	2 7/8		3325		450			

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

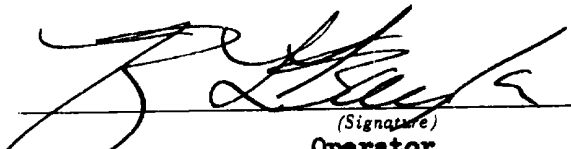


GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1533	24	none	-
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
back pressure	-	190	3/4

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)
Operator
(Title)
11/3/69
(Date)

OIL CONSERVATION COMMISSION

APPROVED **NOV 4, 1969**
BY **Original Signed by Emery C. Arnold**
SUPERVISOR 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 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.