

DISTRIBUTION	
DATE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

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

Form 1104
Supersedes Old C-104 and C-105
Effective 1-1-65

I. OPERATOR

Operator
Northwest Production Corp.

Address
P. O. Box 990, Farmington, New Mexico 87401

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"/>	
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	
		Dry 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 Jicarilla 119N	Well No. 8A	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State (Federal) or Fee	Lease Jicarilla Apache Tribal Cont. 11
Location				
Unit Letter D	800	Feet From The North	Line and 535	Feet From The West
Line of Section 8	Township 26-N	Range 4-W	NMFM, Rio Arriba	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Northwest Pipeline Corp.	P. O. Box 90, Farmington, New Mexico 87401					
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)					
Inland Corp.	P. O. Box 1528, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 8	Twp. 26-N	Rge. 4-W	Is gas actually connected?	When

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
		X	X					
Date Spudded 04-30-77	Date Compl. Ready to Prod. 06-13-77	Total Depth 6428'	P.B.T.D. 6410'					
Elevations (DF, RKB, RT, GR, etc.) 7167' GR	Name of Producing Formation Mesa Verde	Top **/Gas Day 5535	Tubing Depth 6351'					
Perforations 42 6068-82 6098-6106 6142-50 6166-74 6184-88 6249-55 6273-79 6289-6301 6332-40 6354-58 6372-78	TUBING, CASING, AND CEMENTING RECORD					Depth Casing Shoe 6428'		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	218'	224 cu.ft.					
8 3/4"	7"	4158'	186 cu.ft.					
6 1/4"	4 1/2" liner 2 3/8"	3990-6428' 6351'	418 cu.ft.					

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 1819	Length of Test 3 hours	Bbls. Condensate/**** 3 hrs. 21.6	Gravity of Condensate 630
Testing Method (pitot, back pr.) Calc. A.O.F.	Tubing Pressure (Shut-in) 682	Casing Pressure (Shut-in) 1132	Choke Size 3/4" variable

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)

Drilling Clerk

(Title)

June 20, 1977

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
Original Signed by A. G. Hendrick
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.

Form 1104 must be filed for each well in compliance with RULE 1104.