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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-104 and C-1  
Effective 1-1-65

API 30-039-21609

Operator Consolidated Oil & Gas, Inc.	
Address 1860 Lincoln Street, Denver, Colorado 80295	
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 McIntyre	Well No. 1-A	Pool Name, Including Formation Basin Dakota	Kind of Lease Jicarilla State, Federal or Fee Apache	Lease No. Contr. 101
Location				
Unit Letter "K" : 1450 Feet From The South Line and 1850 Feet From The West				
Line of Section 11 Township 26 North Range 4 West, 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 checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Inland Corporation	P. O. Box 1528, Farmington, NM 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)					
Gas Company of New Mexico	1st International Bldg., Dallas, TX 75270					
If well produces oil or liquids, give location of tanks.	Unit "K"	Sec. 11	Twp. 26N	Rge. 4W	Is gas actually connected?	When
					No	

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 Res'v.	Diff. Res'v.
		X	X					
Date Spudded 9-1-78	Date Compl. Ready to Prod. 11-30-78		Total Depth 7826'		P.B.T.D. 7768'			
Elevations (DF, RKB, RT, CR, etc.) 6851' GR	Name of Producing Formation Basin Dakota		Top Oil/Gas Pay 7748'		Tubing Depth 7680'			
Perforations 7748'-7767' (10 x 0.40" holes)					Depth Casing Shoe 7772'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	10-3/4"		293'		300 sx C1 B			
9-7/8"	7-5/8"		3935'		250 sx 65-35 Pozmix			
6-3/4"	5-1/2"		7772'		350 sx 50-50 Pozmix			
	1-1/2"		7680'					

VI. 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 AOF 376; CV 370	Length of Test 3 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) 1 pt back pressure	Tubing Pressure (Shut-in) 1271 psi	Casing Pressure (Shut-in) packer	Choke Size 3/4"

1. 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. T. Stogren, Jr.  
(Signature)  
Vice President, Operations  
(Title)  
December 15, 1978  
(Date)

OIL CONSERVATION COMMISSION	
APPROVED	DEC 21 1978
BY	Original Signed by A. R. Kendrick
TITLE	SUPERVISOR
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.	