

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

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

Consolidated Oil & Gas, Inc.

Address
1860 Lincoln Street, Denver, Colorado 80295

Reason(s) for filing (check proper box)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Change of letter suffix McIntyre 1A to McIntyre 1M
Recompletion ☐ Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (If lease explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name McIntyre	Well No. 1M	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				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Inland	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

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.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, CR, etc.,)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Perforations			Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (piston, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

I. 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.

Floyd E. Ellison Jr.
(Signature)
Vice Pres., Operations, Rocky Mtn. Div.
(Title)
November 2, 1979
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 8 1979, 19
BY Original Signature of F. RAVEZ
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 allow-
able 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.