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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

Operator Northwest Production Corporation	
Address BOX 289, 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"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name JICARILLA 152W	Well No. 2A(PM)	Pool Name, Including Formation PC	Kind of Lease State, Federal or Fee	Jic. Apache Tribal Cont.	Lease No. 152
Location Unit Letter <u>P</u> ; <u>810</u> Feet From The <u>South</u> Line and <u>880</u> Feet From The <u>East</u> Line of Section <u>5</u> Township <u>26N</u> Range <u>5W</u> , NMPM, <u>Rio Arriba</u> County					

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 Production Corporation	BOX 289, FARMINGTON, NEW MEXICO
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)
NORTHWEST PIPELINE CORPORATION	BOX 289, FARMINGTON, NEW MEXICO
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
P 5 26N 5W	

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

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 6/28/78	Date Compl. Ready to Prod. 10-6-78	Total Depth 5855'	P.B.T.D. 5438					
Elevations (DF, RKB, RT, CR, etc.) 6575' GL	Name of Producing Formation Pictured Cliffs	Top CR /Gas Pay 3184	Tubing Depth 3310'					
Perforations 3184-3206, 3214-32, 3240-52 w/20 SPZ.							Depth Casing Shoe 5855'	

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13 3/4"	9 5/8"	216'	224 cf.
8 3/4"	7"	3521'	207 cf.
6 1/4"	4 1/2" liner	3365-5855'	431 cf.
	1 1/4"	3310'	tubing

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
			OIL 2 3/4"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
			DIST. CO.

GAS WELL

Actual Prod. Test-MCF/D 2327	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Calc. A.O.F.	Tubing Pressure (Shut-in) 777	Casing Pressure (Shut-in) 775	Choke Size 3/4"

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.

J. G. Buics
(Signature)
Drilling Clerk
(Title)
11/17/78
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 20 1978, 19_____
BY Original Signed by FRANK E. CHAVEZ
DEPUTY OIL & GAS INSPECTOR
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.