

OIL CONSERVATION DIVISION

P. O. BOX 7088

SANTA FE, NEW MEXICO 87501

Form O-104
Revised 10-1-76REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

API 30-039-21996

Santitas Oil Company

P.O. Box 750, Farmington, New Mexico

(Specify for filing (check proper box))

New Well	☒	Change in Transporter of:		Other (Please explain)
Recompletion	☐	Oil	☐	Commingled Chacra and Mesa Verde
Change in Ownership	☐	Costinghead Gas	☐	
		Dry Gas	☐	
		Condensate	☐	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Laseco	Well No. 812	Pool Name, Including Formation Otero Chacra-Bianco-Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. NM-03733
Location Unit Letter <u>N</u> : <u>1493</u> Feet From The <u>West</u> Line and <u>967</u> Feet From The <u>South</u> Line of Section <u>18</u> Township <u>26 North</u> Range <u>6 West</u> , NMPM, Rio Arriba County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Enell Pipeline	P.O. Box 940, Bloomfield, New Mexico
Name of Authorized Transporter of Costinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico	1508 Pacific Ave., Dallas, Texas
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. C 9 26N 6W
Is gas actually connected?	When
No	

If this production is commingled with that from any other lease or pool, give commingling order number: R-5647

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 7-15-79	Date Compl. Ready to Prod. 8-1-79	Total Depth 7500	P.B.T.D. 7500					
Elevations (DF, RAB, RT, GR, etc.) 0000 C.L.	Name of Producing Formation Chacra and Mesa Verde	Top Oil/Gas Pay 3805	Tubing Depth 5301					
Perforations 3895 to 5364			Depth Casing Shoe 7500					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
11	10 3/4	364	225					
6 1/2	7	7500	1108					
	1 1/4	5301						

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)

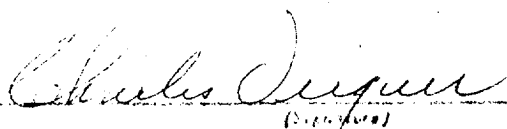
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1642	Length of Test 3 HRS.	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 1000	Casing Pressure (shut-in) 975	Choke Size 3/4

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



Superintendent

(Title)

10-9-79

(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 17 1979, 19
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR DISTRICT #2

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 this 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 change of owner, well name or number, or transporter, or other such change of condition.

Provide Form O-104 must be filed for each pool in multiple completions.