

## OIL CONSERVATION DIVISION

P. O. BOX 7088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Caulkins Oil Company

P.O. Box 780

Farmington, New Mexico

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☒

Other (Please explain)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name Breech	Well No. 224A	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. NM03733
Location Unit Letter <u>D</u> ; <u>790</u> Feet From The <u>West</u> Line and <u>978</u> Feet From The <u>North</u> Line of Section <u>13</u> Township <u>26 North</u> Range <u>7 West</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"/> Inland Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1528 Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) 1508 Pacific Ave. Dallas, Texas					
If well produces oil or liquids, give location of tanks.	Unit <u>D</u>	Sec. <u>13</u>	Twp. <u>26N</u>	Rge. <u>7W</u>	Is gas actually connected? Yes	When <u>11-6-79</u>

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						
Date Spudded 6-19-79	Date Compl. Ready to Prod. 7-9-79		Total Depth 7320		P.B.T.D. 7320			
Elevations (DF, RKB, RT, GR, etc.) 6499 GR	Name of Producing Formation Dakota		Top Oil/Gas Pay 7040		Tubing Depth 7080			
Perforations 7048 - 7198					Depth Casing Shoe 7320			

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10 3/4"	365	225
8 3/4"	7"	7320	1030
	2 3/8"	7080	

TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

(Test must be after recovery of total volume of load oil and must be stable 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-Bble.	Water-Bble.	Gas-MCF

## GAS WELL

Actual Prod. Test-MCF/D 1374	Length of Test 3 Hours	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Backpressure	Tubing Pressure (shut-in) 1949	Casing Pressure (shut-in) PKR	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

2-20-81

(Date)

OIL CONSERVATION DIVISION  
FEB 27 1981

APPROVED \_\_\_\_\_, 19\_\_\_\_

Original Signed by CHARLES GHOLSON

BY \_\_\_\_\_

TITLE DEPUTY OIL &amp; GAS INSPECTOR, DIST. #3

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.