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TRANSPORTER	OIL	
	GAS	
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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 Jerome P. McHugh	
Address Box 208, Farmington, NM 87401	
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 _____

I. DESCRIPTION OF WELL AND LEASE		Lease No. 120
Lease Name Jicarilla	Well No. 3E	Pool Name, Including Formation Basin - Dakota
Kind of Lease State, Federal or Fee		
Location Unit Letter <u>G</u> : <u>1600</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>East</u>		
Line of Section <u>31</u> Township <u>26N</u> Range <u>4W</u> , NMPM, <u>Rio Arriba</u> County		

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>		P O Box 2297, Midland, TX 79702	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
Northwest Pipeline Corp.		P O Box 90, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 31	Twp. 26N
		Rge. 4W	Is gas actually connected? No

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

V. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)			XX	XX					
Date Spudded 6-19-80	Date Compl. Ready to Prod. 8-20-80	Total Depth 7680'		P.B.T.D. 7590'					
Elevations (DF, RKB RT, GR, etc.), 6710' GL	Name of Producing Formation Dakota	Top Oil/Gas Pcy 7413		Tubing Depth 7554' RKB					
Perforations				Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	281'	150 sx
7-7/8"	4-1/2"	7682'	2369cf
	1-1/2"	7554' RKB	

V. 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		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D 2516	Length of Test 3 hrs	----	----
Testing Method (pilot, back pr.) One point back pre.	Tubing Pressure (shut-in) 2505	Casing Pressure (shut-in) 2505	Choke Size 3/4"

VI. 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.

Thomas A. Dugan (Signature)
Agent
(Title)

9-11-80
(Date)

OIL CONSERVATION COMMISSION
APPROVED SEP 18 1980, 19____
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT

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.