

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	
Operator	

CONSOLIDATED OIL & GAS, INC.

Address

P.O. BOX 2038, 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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	TRIBAL C	Well No.	4-E	Pool Name, Including Formation	BASIN DAKOTA	Kind of Lease	State, Federal or Fee	FEDERAL	Lease No.	Jic Cont97
Location										
Unit Letter	H	1850	Feet From The	FNL	Line and	900	Feet From The	E		
Line of Section	6	Township	26N	Range	3W	NMPM,	RIO ARRIBA	County		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
INLAND	1501 EAST MAIN, 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	3539 EAST 30TH, FARMINGTON, NEW MEXICO					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					NO	

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

IV. 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	9-30-80	Date Compl. Ready to Prod.	12-17-81	Total Depth	8385	P.B.T.D.	8375	
Elevations (DF, RKB, RT, GR, etc.)	7223 RKB	Name of Producing Formation	DAKOTA	Top Oil/Gas Pay	7655	Tubing Depth	8269	
Perforations	8164 - 8328					Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	10 3/4		324		300			
9 5/8	7 5/8		4188		175			
6 3/4	4 1/2		8385		730			
	1 1/2		8269					

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)

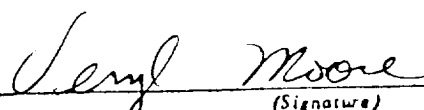
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
		FEB 2 1981 OIL CON. COM. DIST. 3	

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Grav. of Condensate
439	3 Hours	
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)
1 pt. back pr.	1575	---
		Choke Size
		1" Orifice

VI. 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.



PRODUCTION SUPT.

(Title)

1-30-81

(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 17 1981, 19

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #3

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.