

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. Operator Caulkins Oil Company	
Address P. O. Box 780, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change Well Name from State A 113 E
Recompletion <input type="checkbox"/>	to
Change in Ownership <input type="checkbox"/>	State Comm 113 E
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE					
Lease Name State Comm	Well No. 113E	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee	State	Lease No. E-291-17 E-291-26
Location Unit Letter P, 1110 Feet From The South Line and 950 Feet From The East					
Line of Section 2 Township 20 North Range 6 West, NMPM, Rio Arriba County					

III. 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)					
Inland Corporation	Box 1528, Farmington, New Mex. 87401					
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)					
Gas Company of New Mexico	1508 Pacific Ave., Dallas, Texas					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 2	Twp. 20N	Rge. 6W	Is gas actually connected? Yes	When 11-20-81
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	X					
Date Spudded 6-8-81	Date Compl. Ready to Prod. 8-24-81	Total Depth 7730	P.B.T.D. 7730					
Elevations (DF, RKB, RT, GR, etc.) 6640 Gr.	Name of Producing Formation Dakota	Top Oil/Gas Pay 7398	Tubing Depth 7612					
Perforations 7398-7620			Depth Casing Shoe 7730					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4	9 5/8	259	250					
7 7/8	5 1/2	7730	1338					
	2 1/16	7612						

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		Gas-MCF	
Actual Prod. Test-MCF/D	Length of Test				
920	3 hours				
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size		
Back Pressure	1233	Pkr.	3/4		

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.

Charles E. Vergara
(Signature)
Superintendent
(Title)
11p20- 1
(Date)

OIL CONSERVATION DIVISION
APPROVED 11-23-81, 1981
BY Burt J. Shum
TITLE SUPERVISOR DISTRICT #3
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviate 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 multi-