STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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SUR NAME INTO TAILLACT	~60 0		
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		<u> </u>
	GAS		<u> </u>
OPERATOR			<u> </u>
PROBATION OFFICE			<u> </u>
Operator			

Address

New Well

Location

Linit Letter

Date Spudded

Perforations

Length of Test

5-20-82

6669 Gr

13 3/4"

7 7/8"

Line of Section

Recompletion

Change in Ownership

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Caulkins Oil Company DIST P.O. Box 780 Farmington, New Mexico Reason(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: Dry Gas Cil Chacra Mesa Verde Commingled Condensate Casingh If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE E-291-23 fell No. Pool Name, including Formation Kind of Lease State, Federal or Fee State E = 291 - 17State "B" Comm Blanco Mesa Verde 1740 Feet From The 1715 Feet From The West Line and County Rio Arriba , NMPM, Township 26 North 6 West Range Address (Give address to which approved copy of this form is to be sent) P.O. Box 1528 Farmington, New Mexico.
Address (Give address to which approved copy of this form is to be sent) Inland Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas 🕎 Dallas, Texas Gas Company of New Mexico Pac 508 Sec. Rge. Twp. If well produces oil or liquids, give location of tanks. 16 26N If this production is commingled with that from any other lease or pool, give commingling order number: R-7199 IV. COMPLETION DATA Same Restv. Diff. Rest Deepen Plug Back Oil Well Gas Well Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. 9-24-82 Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc., 5320 4646 Mesa Verde Depth Casing Shoe 7520 5164 to 5376 Mesa Verde TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 250 9 5/8" 1500 7520 1300 5 1/2" 1/4" (Test must be after recovery of total volume of load oil and must be equal to or exceed top alloable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure Gas-MCF Water - Bble.

Actual Prod. During Test	Off-Bora.			
		·		
GAS WELL		20/05	Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	G. G	
2322	3 Hrs		Chake Size	
Testing Method (pirot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)		
)	1073	1078	3/4	
Back Pressure 10/3		OIL CONSERVATION DIVISION 1983		
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION		

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.

Clarles	(Signature)	
Superintendent		
	(Title)	
10-12-82		

(Date)

2-4-83 FEB 1 APPROVED Original Signed by FRAINK 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 deepend 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 name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multip

completed wells.