

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
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SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PERMITTING OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Consolidated Oil & Gas, Inc.

Address
PO Box 2038, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☒ New Well	Change in Transporter of:	☐ Oil	☐ Dry Gas
☐ Recombination	☐ Castorhead Gas	☐ Condensate	
☐ Change in Ownership			

Other (Please explain):

JAN 02 1985
OIL CON. DIV.
DIST. 3

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name HOYT	Well No. 2E	Pool Name, including Formation Basin Dakota	Kind of Lease INDIAN	Lease No. JIC. CONT. 119
Location				
Unit Letter I : 1600 Feet From The south Line and 790 Feet From The east				
Line of Section 5 Township 26N Range 4W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Giant Refining Co.	PO Box 256, Farmington, NM 87499
Name of Authorized Transporter of Castorhead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline Corp.	3539 E 30th St, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
Unit I Sec. 5 Twp. 26N Rge. 4W	no

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

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.

Dakota C. Rex
(Signature)

Engineering Technician
(Title)

12-21-84
(Date)

1-16-85 OIL CONSERVATION DIVISION
APPROVED JAN 16 1985
BY Original Signed by FRANK I. CHAVEZ
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 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.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
		X	X					
Date Spudded 8-17-84	Date Compl. Ready to Prod. 11-1-84	Total Depth 8450'	P.B.T.D. 8393' PG, 8390' CO					
Elevations (DF, RKB, RT, GR, etc.) 7260' KB, 7247' GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 8162'	Tubing Depth 7760' 8360					
Perforations 8162'-8370'			Depth Casing Shoe 8437'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15-1/2"	10-3/4"	357'	553 cu ft
9-7/8"	7-5/8"	4280'	720 cu ft
6-3/4"	5-1/2"	4073'-8437'	517 cu ft
-	1-1/2" TBG	8360'	-

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed test allowable for this depth or be for full 24 hours)

Oil First New Oil Run To Tank	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 TEST: 12-4-84

Actual Prod. Test - MCF/D 2045 MCFD (256 MCF)	Length of Test 3 hrs	Bbls. Condensate/MCF mist	Gravity of Condensate -
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-In) 1127 psig	Casing Pressure (Shut-In) -	Choke Size 2x6x3/4"