## ENERGY AND MINERALS DEPARTMENT

PR. 00 (0010) 000		1	
<del></del>		<b>├</b> ─	
DISTRIBUTION			
SANTA PE			
FILE		Ī	
V.1.G.1.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRODATION OF			

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

District of the properties of the contraction of th

REQUEST FOR ALLOWABLE

	TRANSPORTER GAS	AND						
	PROBATION OFFICE							
•	Operator							
ļ	Caulkins (	0il Company		<del></del>				
Ì	P.O. Box 780 Farmington, New Mexico 87499							
ľ	Reason(s) for filing (Check proper b		Other (Please explain)					
	New Well	Change in Transporter of:						
1	Recompletion	Casinghead Gas Conder	<b>7</b>		SEP 1 0 1985			
Į	Change in Ownership	Castrigheas Cas Conde	OII CON. DIV.					
	If change of ownership give name	·			DIST. 3	••		
•	and address of previous owner	actives of previous owner.						
	DESCRIPTION OF WELL AN	Well No.   Pool Name, Including F	armatica.	Kind of Leges		Lease No.		
	Breech "E"	89-E South Blanco		_	or Fee Federal	NM03551		
ł	Location	o decembrate	100100	•	rederar	IMMOJJJI		
١	Unit Letter E : 16	25 Feet From The North Lin	790	Feet From 1	west			
	_		* -					
Į	Line of Section 3 T	ownship 26 North Range	6 West , NMPM	. Rio	Arriba	County		
	NECTON ASSOCIATION	RTER OF OIL AND NATURAL GA	Œ		,			
Ì	Name of Authorized Transporter of C	OIL OF CONDENSE TO OF	Address (Give address to which appro		red copy of this form is to be sent)			
1	Giant Refinery Comp	pany	P.O. Box 256 F	armington	, New Mexico	New Mexico		
Ì	Name of Authorized Transporter of C	,	Address (Give address to which approved copy of this form is to be sent)			to be sent)		
ļ	El Paso Natural Ga		P.O. Box 900 F					
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Ree.  E 3 26N 6W	No	1 27 t 1 mm	14	•		
ſ		with that from any other lease or pool,				<del>,</del>		
	COMPLETION DATA	vits that from any other lease or poor,						
Ì	Designate Type of Complet	Oil Well Gas Well.	New Well. Workover	Deepen.	Plug Back   Same Re	er. Diff. Restv		
ļ			X Total Depth		P.B.T.D.			
-	7-5-85	Date Compl. Ready to Prod.	7536 T		7536			
}	Elevations (DF, RKB, RT, GR, etc.)	Nome of Producing Formation 6532 GR Tocito  11008  6790 to 6802 (Tocito)  TUBING, CASING, AND		7330 Top Oil/Gas Pay 6788'  2 per ft. CEMENTING RECORD DEPTH SET		Tubing Depth 6869 1 Depth Cosing Shoe 7536		
t	Perforations							
L								
}	12 1/4"	CASING & TUBING SIZE	432'		250 Sacks(321			
ŀ	7 778"	5 1/2"	7536 <b>'</b>		1300 Sacks (20			
ŀ		2 3/8"	6869 <b>'</b>					
ľ			<u> </u>		<u>i</u>			
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lead oil and must be able for this depth or be for full 24 hours)						esceed top allow		
-			Producting Method (Flow, pump, gas lift, etc.)					
9-9-85		9-9-85	Flow		Choke Size			
		Tubing Pressure						
	2 1/2 Hours	39	187		32/64			
ŀ	Actual Prod. During Test	Oll-Bhis.	Water-Bbis.	•	Gas-MCF			
١	10	10	0		60			
	446 WEST T							
٢	GAS WELL Actual Prod. Teet-MCF/D	Length of Test	Bbis. Condensette/MMC	F	Gravity of Condensate	<del></del>		
1								
1	Teeting Method (puot, back pr.)	Tubing Pressure ( short-in )	Casing Pressure (Shut	-i=)	Choke Size			
L	Back Pressure				3/4"			
. (	ERTIFICATE OF COMPLIANCE		ll oir c	ONSERVAT	ION DIVISION	+ 0 100E		
			APPROVED		<u> </u>	<u> 1985                                    </u>		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given			Original Stand by TRACK T. CHAVEZ			•		
i	shove is true and complete to t	8						
		TITLE	SUPERVISOR DISTAICT 朝 3					
	1000	• .	This form is to	be filed in o	compliance with RUL	E 1104.		
	6 K. V. E	() 60 0 000	If this is a request for allowable for a newly drilled or deepened					

(Signature) Superintendent C

(Title)

(Date)

9-9-85

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 allow-able on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of owner, eil 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.