

SANTA FE, NEW MEXICO 8750

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APR 10 1985  
OIL CON. DIV.  
DIST. 3

Curtis J. Little  
P.O. Box 1258  
Farmington, NM 87499

Reason(s) for filing (Check proper box)

Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Completion	<input type="checkbox"/>	Oil	<input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Coastinghead Gas	<input type="checkbox"/> Condensate <input type="checkbox"/>

Other (Please explain)

THIS 30-DAY TEMPORARY ALLOWABLE IS FOR COMPLETION OF WELL.

change of ownership give name  
and address of previous owner \_\_\_\_\_

### DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Free	Lease No.
Warren <i>Federal</i>	3E	Devil's Fork Gallup	Federal	SF079139A

**References**

Unit Letter H . 1750 Feet From The North Line and 790 Feet From The East

Line of Section 26 Township 25N Range 6W, NMPM, Rio Arriba County

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Signature of Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)

Giant Refining Company	P.O. Box 9156, Phoenix, AZ 85068
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Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)

	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
well produces oil or liquids, ve location of tanks.	H	26	25N	6W	YES	

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

## COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	Y	Y	Y					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12/19/84	1-16-85	7168	7126

Well Name	Location	Producing Formation	Top Oil/Gas Pay	Tubing Depth
6632' GR	Devil's Fork Gallup	5951	6934 6234	

rotations	5951, 56, 60, 67, 69, 83, 85, 87, 90, 92, 94, 96, 98, 6000, 06, 08, 14, 16, 18, 82, 85, 93, 95, 7107, 09, 11, 13, 15, 30, 36, 47, 6218, 22, 42, 46, 48, 50, 60, 62	Depth Casing Shoe 7168
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## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	215 <del>KB</del>	165 sx. Class B
7 7/8"	5 1/2"	7168 <del>KB</del>	430 sx. 50/50 Poz &
	2-1/16"	6234 <del>KB</del>	637 sx. lite & 75 sx.
			Class B

ST DATA AND REQUEST FOR ALLOWABLE  
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) .

is First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
1/16/85	1/25/85	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
4 hours	50	500	64/64
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	15	150	100

S WELL

Level Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Drilling Method (pilot, back pr.)	Tubing Pressure (shot-in)	Casing Pressure (shot-in)	Choke Size

## CERTIFICATE OF COMPLIANCE

do hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given is true and complete to the best of my knowledge and belief.

(T-11)

March 8, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED APR 10 1985

Original Signed by FRANK T. CHAVEZ

TITLE \_\_\_\_\_ SUPERVISOR DISTRICT # 3

This form is to be filled 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 allowance 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 filled for each pool in multiply completed wells.