

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

B.K.

DATE	FILE	U.S.G.S.	LAND OFFICE	TRANSPORTER	OIL	GAS	OPERATOR	PRORATION OFFICE

Operator Hixon Development Company	
Address P. O. Box 2810, Farmington, New Mexico	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Other (Please explain) Former shut in injection well returned to pump. Well name changed from GI-8 to CBU No. 70.
Change in Ownership <input type="checkbox"/>	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Central Bisti Unit	Well No. 70	Pool Name, including Formation Lower Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. 14-20-603-
Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line of Section 4 Township 25N Range 12W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Oil Pipeline	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	C 5 25 12

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded 9-2-56	Date Compl. Ready to Prod.	Total Depth 4972'	P.B.T.D. 4952'
Elevations (DF, RKB, RT, GR, etc.) 6168' DF	Name of Producing Formation Lower Gallup	Top Oil/Gas Pay 4764'	Tubing Depth 4761'
Perforations 4928'-36', 4843'-57', 4828'-38', 4792'-96', 4764'-82'	Depth Casing Shoe 4971'		
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8"	DEPTH SET 295'	SACKS CEMENT 150 sacks
7 7/8"	5 1/2" 2 3/8"	4971'	400 sacks

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 6-16-77	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 4 hours	Tubing Pressure 60	Casing Pressure 60	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 8 BOPD	Water - Bbls. 71 BWPD	Gas - MCF TSTM

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

A. R. Kendrick
(Signature)
Petroleum Engineer
(Title)
July 28, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
Original Signed by A. R. Kendrick
BY _____
TITLE _____

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 multiple