

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Jerome P. McHugh

Box 208, Farmington, NM 87401

Reason(s) for filing (Check proper box)		Other (Please explain)	
Well	☐	Change in Transporter of:	
Completion	☐	Oil ☒	Dry Gas ☐
Change in Ownership	☐	Coatinghead Gas ☐	Condensate ☐

Effective August 17, 1981

Range of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Well Name	Erin Stays Com	1	Basin Dakota	State, Federal or Fee Fed	NM 3778
Location	A	790	Feet From The North	Line and	790
Well Letter	2	Township	25N	Range	11W
Line of Section				NMPLM	San Juan
					County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Signature of Authorized Transporter of Oil ☐ or Condensate ☒	Giant Refining, Inc.	Petroleum Plaza, Suite 238, Farmington, NM 87401	
Signature of Authorized Transporter of Coatinghead Gas ☐ or Dry Gas ☒	Northwest Pipeline Corp.	P.O. Box 90, Farmington, NM 87401	
Well produces oil or liquids	Unit	Sec.	Twp.
or location of lease	A	2	25N
			11W

This production is commingled with that from any other lease or pool, give commingling order numbers		Is gas actually collected? When	
COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well
			Workover
			Deepen
Date Spurred	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Productions (DF, R.N.B., RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 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		Bbls. Condensate/MCF		Gravity of Condensate
Actual Prod. Test - MCF/D	Length of Test			
Producing Method (Flow, back pr.)	Tubing Pressure (Foot-lb)	Casing Pressure (Foot-lb)	Choke Size	

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.		APPROVED AUG 19 1981	
T. A. Dugan, Agent		Original Signed by FRANK T. CHAVEZ	
8-17-81		SUPERVISOR DISTRICT 19	
		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 deviate 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.	
		Form C-104 must be filled for each pool in multiple.	