Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 19° 9, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

Santa Fe, New Mexico 87504-2088

P.O. Box 2088

DISTRICT III	Sa	nta Fe, New Me	exico 875	04-2088					
1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FO	OR ALLOWAE	BLE AND	AUTHORI	ZATION				
I. Operator	TOTRA	NSPORT OIL	AND NA	TURAL G	<u>AŚ</u>				
Giant Exploration & Production Company Address				L.			API No. 045-28515		
P.O. Box 2810, Farmi Reason(s) for Filing (Check proper box)	ngton, NM 8	7499							
New Well	Change in	Transporter of:	Ou	cr (Please expl	ain)				
completion Oil Dry Gas									
Change in Operator	Casinghead Gas	Condensate							
If change of operator give name and address of previous operator									
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Prod Name Including Formation									
West Bisti Coal 24	Well No.				of Lease Lease No. Federal or Fee NM 58138				
Location Unit Letter A	. 790	Feet From The N	orth	and 790	:		East		
		10		G.	FCC	t From The	EdSt	Line	
Section 24 Township		Range 13W		MPM, Sa	an Juan			County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	RAL GAS								
or Audionzed Transporter of Oil	OAS HY 9	Address (Give address to which approved copy of this form is to be sent)							
Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent								nt)	
Giant Exploration & Production Company well produces oil or liquids, Unit Sec. Twp. Rge.			P.O. B	y connected?	Farming	ton, NM 87499			
give location of tanks.	<u> </u>	<u> </u>	no	-					
If this production is commingled with that f IV. COMPLETION DATA	from any other lease or $\frac{28}{2}$	pool, give comming!	ing order num	ber:					
Designate Type of Completion	Oil Well		•	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to	Prod.	X Total Depth	l	<u> </u>	D D T D		1	
02-28-91	07-17-91	1450'			P.B.T.D. 1398.53 ¹				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Fo	Top Oil/Gas Pay			Tubing Depth				
6431' GLE Basin Fruitland Coal Perforations			1272'			1257'			
1272' - 1289'					•	Depth Casing S	hoe		
	TUBING,	CASING AND	CEMENTI	NG RECOR	D	·			
HOLE SIZE 8-3/4"	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
6-1/4"	711		176.89'			See Exhibit "A"			
0-1/4	4-1/2"		1442			See Exhibit "A"			
V. TEST DATA AND REQUES					10 15 (
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Test	of load oil and must	be equal to or	exceed top allo	own ble for this	depth or be for	च्या २५ वर्ष	s.)	
N/A	Date of Test		Producing M	ethod (Flow, pu	MAR	n a 183 3			
Length of Test	Tubing Pressure	Casing Press	ıre	OIL C	Choke Size				
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.			NET MEN				
GAS WELL	<u> </u>	- 	<u> </u>				****	<u> </u>	
Actual Prod. Test - MCF/D	Length of Test		Bbls. Conder	sate/MMCF		Gravity of Cond	lensate		
No flow	24 hours		0			N/A			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size			
back pressure	0	175 psi			1/4"				
VI. OPERATOR CERTIFIC			ll ,		ICEDV/	ATION DI	MOLO	. N. 1	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					NOENVA	ום אוטו ו	V151C	NA NA	
is true and complete to the best of my knowledge and belief.				Date ApprovedMAR 1 9 1993					
11000				: whbtone	u	4			
Signature Culoff				By Bin Shan					
Printed Name	Title			SUPERVISOR DISTRICT #3					
3/17/93		326-3325	Title				·		
Date	Tele	phone No.	H						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

WEST BISTI COAL 24 WELL NO. 1 790' FNL, 790' FEL SECTION 24, TOWNSHIP 25 NORTH, RANGE 13 WEST LEASE NO. NM 58138 SAN JUAN COUNTY, NEW MEXICO COMPLETION REPORT EXHIBIT "A"

CEMENT RECORD

Surface Casing Mixed and pumped 80 sks. (94.4 cu.ft.) of Class "B" cement containing 2% CaCl2 and 1/4#/sk. cellophane flakes. Cement circulated

to surface.

Production Casing -

Mixed and pumped 80 sks. (164 cu.ft.) Class "B" cement containing 2% Thriftyment and 1/4#/sk. cellophane flakes. Tailed in with 80 sks. (94 cu.ft.) of Class "B" cement containing 2% CaCl2 and 1/4#/sk. cellophane flakes. Cement

And the second s

circulated to surface.