

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Caulkins Oil Company  
Address  
P.O. Box 780 Farmington, New Mexico  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Breech "F"	Well No. 1-E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease N NM 0354
Location Unit Letter M, 1043 Feet From The South Line and 983 Feet From The West Line of Section 33 Township 27 North Range 6 West, NMPM, Rio Arriba Count				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Giant Refinery Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256 Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990 Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 33	Twp. 27N	Rge. 6W	Is gas actually connected? No	When

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res
		X	X					
Date Spudded 7-10-83	Date Compl. Ready to Prod. 8-15-83	Total Depth 7687'	P.B.T.D. 7687'					
Elevations (DF, RKB, RT, GR, etc.) 6643 GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 7359'	Tubing Depth <del>7650'</del> 7530'					
Perforations 7359' to 7657' Dakota			Depth Casing Shoe 7687'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	9 5/8"	408'	354 Cu.Ft. (300 Sacks)					
7 7/8"	5 1/2"	7687'	2004 Cu.Ft. (1300 Sacks)					
	<del>5 1/2"</del> 1 1/2"	<del>7687'</del> 7530'						

VI. 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 all able for this depth or be for full 24 hours)

Date First New Oil Flun To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Flow Rate
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Bbls.

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AUG 23 1983

GAS WELL

Actual Prod. Test-MCF/D 2,195	Length of Test 3 Hours	Bbls. Condensate/MMCF DIST. 3	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1,959	Casing Pressure (Shut-in) 1,957	Choke Size 3/4"

CERTIFICATE OF COMPLIANCE

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.

Charles E. Vergara  
(Signature)  
Superintendent  
(Title)  
8-22-83  
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 14 1983  
BY Original Signed by FRANK J. CHAVEZ  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepen 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.  
Separate Forms C-104 must be filed for each pool in multi-completed wells.