| | NO. OF COPIES RECEIVED 1 1 | | | | | | | | | | |
|-----|--|---|--|--|---|-----------|--------------|--------------------|-------------------------------|--|--|
| | — - — — — — — <u>— — — — — — — — — — — — —</u> | | | | | | | | | | |
| | DISTRIBUTION | NEV | NEW MEXICO OIL CONSERVATION COMMISSION | | | | | Form C+104 | | | |
| | SANTA FE / | | REQUEST FOR ALLOWABLE | | | | | | Supersedes Old C-104 and C-11 | | |
| | FILE | | | AND | | | | ffective 1-1-65 | | | |
| | U.S.G.S. | ALITHOPIZ | ATION TO TR | | OIL AND Y | IATUDAI | 0.4.5 | | | | |
| | LAND OFFICE | AUTHORIZA | ATION TO TR | ANSPURI | OIL AND I | NATURAL | GAS | | | | |
| | OIL | | | | | | | | | | |
| | TRANSPORTER | | | | | | | | | | |
| | GAS / | | | | | | | | | | |
| | OPERATOR | | | | | | | | | | |
| I. | PRORATION OFFICE | | | | | | | | | | |
| | Operator | | | | | | | | | | |
| | International Oil & Gas Corporation | | | | | | | | | | |
| | | | | | | | | | | | |
| | 825 Petroleum Club Building, Denver, Colorado 80202 Reason(s) for filing (Check proper box) Other (Please explain) | | | | | | | | | | |
| | No. of the second secon | | | | | | | | | | |
| | Sharps III Transporter of | | | | | | | | | | |
| | Recompletion | Oil | Dry G | as | NMOCC N | 1emo 2-6 | 5 | | | | |
| | Crainge in Ownership Casinghead Gas Condensate | | | | | | | | | | |
| | If change of ownership give name and address of previous owner | e | | | | | | | | | |
| П. | DESCRIPTION OF WELL AN | D LEASE | | | | | | | | | |
| | Leane Name | Lease No. | Well No. Pool No | ame, Includin | g Formation | | Kind of L | ease | | | |
| | Hancock | SF 079116 V | 4 West | Kuta P | ictured | Cliffe | | deral or Fee F | odonal | | |
| | Location | 01 073110 1 | + IMESC | Nucz I | recarea | CTITIO | Jotate, 1 ee | - F | ederar | | |
| | 7) | 000 | 37 | 0 | 00 | | _ | | | | |
| | Unit Letter A ; 990 Feet From The North Line and 900 Feet From The East | | | | | | | | | | |
| | | | | | | | | | | | |
| | Line of Section 11 | Township 27N | Range | <u> 12W </u> | , NMPM, | San | Juan | | County | | |
| | | | | | | | | | | | |
| II. | DUSIGNATION OF TRANSPO | NATURAL GA | iAS | | | | | | | | |
| | Maine of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sen | | | | | | | be sent) | | | |
| | | | | | | | | | | | |
| | liame of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) | | | | | | | be sent) | | | |
| | Southern Union Gas Company | | | | Addiess (Cive address to which approved copy of this form is to be sent) Fidelity Union Tower Building 1507 Pacific Avenue, Dallas, Texas | | | | | | |
| | Linit Sec Two Bre | | | | Is gas actually connected? When | | | | | | |
| | if well produces oil or liquids, | | . wp. | is gas acti | idiry connecte | a, 1 mm | | | | | |
| | give location of tanks. | ii | | | yes | <u></u> | | 1-21-51 | | | |
| | If this production is commingled | with the from any other | er lease or pool, | give commi | ingling order | number: | | | | | |
| V. | COMPLETION DATA | | | | _ | | | | | | |
| | D : . T (C) | Oil Well | I Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. | | |
| | Designate Type of Comple | tion - (X) | xx | 1 | į | i | i | i | | | |
| | Date Spudded | Date Compl. Ready t | | Total Dept | h | 1 | P.B.T.D. | | | | |
| | 0 0 57 | 30 6 53 | 10 6 51 | | | | | 746 | | | |
| | 9-9-51 Elevations (DF, RKB, RT, GR, etc. | 51 10-6-51 RKB, RT, GR, etc.; Name of Producing Formation | | | 1746 Top Oil/Gas Pay | | | 746 † | | | |
| | | · | | | | | Tubing De | pth | | | |
| | 5983 Gr Pictured Cliffs | | | 1633 | | | | 722 † | | | |
| | Perforations | | | | | | Depth Cas | ing Shoe | | | |
| | Open hole 1637-1746 * | | | | | | 1 | 637 ¹ | | | |
| | TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | | |
| | HOLE SIZE | | CASING & TUBING SIZE | | | DEPTH SET | | | SACKS CEMENT | | |
| | | | | | | | | 75 | | | |
| | 13-3/8" | | 10-3/4" | | 125 | | | | | | |
| | 8 - 3/4 ^{rr} | 711 | 7" | | 1637 | | <u> </u> | 00 | | | |
| | | | | | | | | | | | |
| | 1722 t | | | | | | | | | | |
| ٧. | TEST DATA AND REQUEST | FOR ALLOWABLE | (Test must be a | | | | and must be | equal to or exc | eed top allow- | | |
| | OII. WELL able for this depth or be for full 24 hours) | | | | | | | 0511 | | | |
| i | uto First New Oil Run To Tanks Date of Test | | | Producing Method (Flow, pump, gas lift, etc.) | | | ft, etc.) | CEL FIL | | | |
| | · | | | | | | / | / K [[13] [| 4 E [] / | | |
| | Length of Test | Tubing Pressure | | Casing Pressure | | Choke Sz | Choke Sze | | | | |
| | - | _ | | | - · | | | 3101#3 | 19 65 | | |
| | Actual Prod. During Test | tual Prod. During Test Oil-Bbls. | | | Water - Bbls. | | | NOV 1 | 1305 | | |
| | Actual Float During 1981 | J 2018. | | | | | Gas-MOF | OIL CON | COM. | | |
| 1 | | | | 1 | | | | | | | |
| | | | | | | | ` | DIST | . s / | | |
| | GAS WELL | | | | | | | | | | |

B. P.

VI. CERTIFICATE OF COMPLIANCE

Actual Prod. Test-MCF/D

1930

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.

Length of Test

Tubing Pressure

3 hr

no record

| gim S. Schwenn | | | | | | | |
|-----------------------------------|--|--|--|--|--|--|--|
| (Signature) | | | | | | | |
| Wm. F. Schwenn, District Engineer | | | | | | | |
| (Title) | | | | | | | |
| October 29, 1965 | | | | | | | |

(Date)

OIL CONSERVATION COMMISSION

Choke Size

Gravity of Condensate

NOV 1 1965

Original Signed Emery C. Arnold

TITLE _____Supervisor Dist. # 3

Bbls. Condensate/MMCF

no record

Casing Pressure

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 multiply completed wells.