

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
S.E.R.H., Inc.

Address
c/o A. R. Kendrick, Box 516, Aztec, NM 87410

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo 32	Well No. 1	Pool Name, including Formation Big Gap Organ Rock	Kind of Lease State, Federal or Free XXXX XXXXX	Lease No. N00-C-14-20-4158
Location Unit Letter <u>0</u> ; <u>660</u> Feet From The <u>South</u> Line and <u>2150</u> Feet From The <u>East</u> Line of Section <u>32</u> Township <u>27N</u> Range <u>19W</u> , NMPM, <u>San Juan</u> County				

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 Refining Company	Address (Give address to which approved copy of this form is to be sent) Box 256, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> S.E.R.H., Inc.	Address (Give address to which approved copy of this form is to be sent) Box 312, Otis, Kansas 67565
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. 32 27N 19W
Is gas actually connected?	When Yes April 3, 1978

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

AR Kendrick
(Signature)
Agent
(Title)
September 19, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 10 1986
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 9

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.

SEP 24 1986
OIL CONSERVATION DIVISION

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X		X		X		X
Date Spudded 10/24/76	Date Compl. Ready to Prod. Rework 9/18/86		Total Depth 6285'			P.B.T.D. Rework 3872			
Elevations (DF, RKB, RT, CR, etc.) 5868 GR, 5880 KB	Name of Producing Formation Organ Rock		Top Oil/Gas Pay 3698			Tubing Depth 3777'			
Perforations 3698'-3718' = 21; 3724'-28' = 6; 3746'-48' = 3; 3753'-58' = 8; 3762'-68' = 9; 3785'-88' = 4; 3797'-3800' = 4. Total 55 (0.38" jets)						Depth Casing Shoe 6285'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/4"		13 3/8"		87'		Circulated			
12 1/4"		8 5/8"		1440'		550 sx.			
7 7/8"		4 1/2"		6285'		250 sx			
		2 3/8"		3777'					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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	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

Actual Prod. Test - MCF/D 300	Length of Test 3 hours on cleanup	Bbls. Condensate/MMCF 0	Gravity of Condensate 0
Testing Method (pilot, back pr.) Open flow	Tubing Pressure (Shut-In) 1420	Casing Pressure (Shut-In) 1420	Choke Size 2" open tubing