

# REQUEST FOR ALLOWABLE AND

## AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator Energy Reserves Group, Inc.	
Address P.O. Box 3280 Casper, Wyoming	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner \_\_\_\_\_

### II. DESCRIPTION OF WELL AND LEASE

Lease Name E.H. Pipkin	Well No. 8-E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078019
Location Unit Letter <u>P</u> : <u>950</u> Feet From The <u>South</u> Line and <u>890</u> Feet From The <u>East</u> Line of Section <u>1</u> Township <u>27N</u> Range <u>11W</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"/>	Address (Give address to which approved copy of this form is to be sent)
Giant Refining, Inc.	P.O. Box 256, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering Co.	First International Bldg. Dallas, Texas 75720
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	No W.O. Pipeline

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

### 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					
Date Spudded 4-27-80	Date Compl. Ready to Prod. 7-1-80	Total Depth 6210'	P.B.T.D. 6157'					
Elevations (DF, RKB, RT, GR, etc.) GRD 5736' KB 5750'	Name of Producing Formation Dakota	Top Oil/Gas Pay 6097'	Tubing Depth 6119'					
Perforations 4364'-65' (4 perfs)- Squeeze perfs; 6098'-6108'; 6110'-6114' w/JSPF			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD 6121'-6122'								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	304' KB	250sx "B"+2% CACL <sub>2</sub>					
			+1/4#/sx Flocele					
7-7/8"	4-1/2"	6203' KB	*See Back of Page					
	2-3/8"	6119'						

### V. 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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			1 1/2" 1990
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

### GAS WELL \*Tested w/orifice well tester thru test separator

Actual Prod. Test-MCF/D 132	Length of Test 24 Hours	Bbls. Condensate/MMCF 4	Gravity of Condensate 50°
Testing Method (pilot, back pr.) *See above note	Tubing Pressure ( ) 75	Casing Pressure (Shut-in) 300	Choke Size 1 1/2"

### VI. CERTIFICATE OF COMPLIANCE

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.

Judith Ross  
(Signature)  
District Clerk  
(Title)  
7-10-80  
(Date)

### OIL CONSERVATION COMMISSION

APPROVED JUL 1 1980, 19\_\_\_\_\_  
BY Original Signed by FRANK T CHAVEZ  
SUPERVISOR DISTRICT #1  
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 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