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

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator PETROLEUM CORPORATION OF TEXAS		
Address P. O. Box 911 Breckenridge, Texas 76024		
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 Kutz Government	Well No. 5-J	Pool Name, including Formation Fulcher-Kutz Pictured Cliffs	Kind of Lease State, Federal or Fee Fed.	Lease No. SF-046563
Location Unit Letter F ; 1710 Feet From The North Line and 1820 Feet From The West Line of Section 2 Township 27N Range 10W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Gas Company of New Mexico	P.O. Box 1899, Bloomfield, N.M. 87413	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge.
		Is gas actually connected? When
		NO Unknown

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 5/4/80	Date Compl. Ready to Prod. 8/12/80	Total Depth 2051'		P.B.T.D. 2023'				
Elevations (DF, RKB, RT, GR, etc.) 5924'KB	Name of Producing Formation Pictured Cliff		Top Oil/Gas Pay 1917'		Tubing Depth 1875'			
Perforations 1871'-1875'; 1884'-1900', 1913'-1917					Depth Casing Shoe 1883'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		140		100			
7-7/8"	4-1/2"		2051		435			
	2-3/8"		1875'					

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 3/4" 395, CAO 655	Length of Test 3 hrs.	Bbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 230	Casing Pressure (Shut-in) 230	Choke Size 3/4"

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.

FOR: PETROLEUM CORPORATION OF TEXAS

ORIGINAL SIGNED BY  
EWELL N. WALSH

Ewell N. Walsh, PE (Signature) President  
Walsh Engineering & Production Corp.

9/3/80

(Date)

OIL CONSERVATION COMMISSION  
APPROVED SEP 10 1980  
BY Original Signed by FRANK T. 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 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.