

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form for Oil and Gas
Effective 1-1-65

I.

Operator Energy Reserves Group, Inc.	
Address P.O. Box 3280, Casper, Wyoming 82602	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Other (Please explain)
Change in Ownership <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. 11-E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078019
Location Unit Letter <u>J</u> : <u>1780</u> Feet From The <u>South</u> Line and <u>1690</u> Feet From The <u>East</u>				
Line of Section <u>12</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"/> Giant Refining, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering Co.	Address (Give address to which approved copy of this form is to be sent) First International Bldg. Dallas, Texas 75720	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	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 8-08-80	Date Compl. Ready to Prod. 9-05-80	Total Depth 6,360'		P.B.T.D. 6,320'					
Elevations (DF, RKB, RT, GR, etc.) 5,900' GL; 5,914' KB	Name of Producing Formation Dakota	Top Oil/Gas Pay 6,177'		Tubing Depth 6,252'					
Perforations 6,227' - 29', 6,232' - 39', 6,244' all w/1 JSPF (12 perfs)		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"	DEPTH SET 432'		SACKS CEMENT 275 sx "B" w/2% CaCl ₂					
7-7/8"	4-1/2"	6,358'		1# Flocele/sx					
	2-3/8"	6,252'		*See back of page					

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
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 1043	Length of Test 24 hrs.	Bbls. Condensate/MMCF 11	Gravity of Condensate + 50
Testing Method (pilot, back pr.) *See above note	Tubing Pressure () 250 psi	Casing Pressure (Shut-in) 400 psi	Choke Size 25/64"

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.

Adith Ross
(Signature)
District Clerk
(Title)
9/9/80
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 15 1980, 19____
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

Cement Record - 4-1/2"

1st Stage - 100 sx 50-50 Poz w/1/4#
Flocele/sx.; followed by 300
sx "B" w/10% salt.

2nd Stage - 550 sx 50-50 Poz w/1/4#
Flocele/sx. Stage Collar @
4,439'.

3rd Stage - 350 sx Lite w/1.4# Flocele/sx.
followed by 200 sx of 50-50
Poz w/1/4# Flocele/sx. Stage
Collar @ 1,788'.