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| | GAS |
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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

I. Operator
Koch Exploration Co.

Address
P.O. Box 2256 Wichita, Kansas 67201

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)
OIL CONSERVATION DISTRICT

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|-----------------|---|---|------------------------|
| Lease Name Dryden | Well No. 1-E | Pool Name, including Formation Basin Dakota - Dakota | Kind of Lease State, Federal or Fee Federal | Lease No. NM-013861 |
| Location Unit Letter A ; 1300 Feet From The North Line and 555 Feet From The East Line of Section 28 Township 28N Range 8W , 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 checked="" type="checkbox"/> Gary Energy Corporation | Address (Give address to which approved copy of this form is to be sent) P.O. Box 489, Bloomfield, New Mexico 87413 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co. | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Texas 79978 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit A | Sec. 28 | Twp. 28N | Rge. 8W | Is gas actually connected? Yes | When 11-30-84 |

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. |
| | | XX | X | | | | | |
| Date Spudded 6-21-84 | Date Compl. Ready to Prod. 7/18/84 | | Total Depth 7200 | | P.B.T.D. 7184 | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6267.5 KB | Name of Producing Formation Dakota | | Top Oil/Gas Pay 6952 | | Tubing Depth 7000 | | | |
| Perforations 6952, 6954, 6958, 6964, 7026, 7028, 7032, 7034, 7038, 7040, 7072, 7074, 7092, 7106, 7108, 7110, 7136, 7138, 7140, 7154, 7156, 7178, 7180, 7182 | | | | | Depth Casing Shoe 7194 | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 13 3/4 | 10-3/4 | | 217 | | 150 | | | |
| 9-7/8 | 7-5/8 | | 2870 | | 500 | | | |
| 6-3/4 | 5-1/2 | | 7194 | | 467 | | | |
| | 2-3/8 | | 7000 | | | | | |

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

| | | | |
|---|-----------------------------------|-----------------------------------|-----------------------|
| Actual Prod. Test-MCF/D 869 | Length of Test 24 | Bbls. Condensate/MMCF Trace | Gravity of Condensate |
| Testing Method (pitot, back pr.) Open flow | Tubing Pressure (shut-in) 2380 | Casing Pressure (shut-in) 2380 | 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.

Kenneth Seymour
(Signature)
Administrative Coordinator
(Title)
December 5, 1984
(Date)

OIL CONSERVATION COMMISSION
DEC 7 1984
APPROVED _____, 19____
BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT # 3
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 completed wells.