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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION 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 1-1-83

3055 IN  
4-3-85

Operator ENERGY RESERVES GROUP, INC.	
Address P. O. Box 3280, Casper, WY 82602	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	

RECEIVED  
MAR 26 1985  
OIL CON. DIV.  
DIST. 3

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name E. H. Pipkin	Well No. 26	Pool Name, including Formation Kutz Gallup	Kind of Lease State, Federal or Foreign Federal	Lease No. SF078109
Location				
Unit Letter <u>E</u> ; <u>1470</u> Feet From The <u>North</u> Line and <u>850</u> Feet From The <u>West</u>				
Line of Section <u>12</u> Township <u>27N</u> Range <u>11 W</u> , NMPM, <u>San Juan</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Co	Address (Give address to which approved copy of this form is to be sent) P. O. Box 256, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Co.	Address (Give address to which approved copy of this form is to be sent) 1800 First International Bldg, Dallas, TX 75270	
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 12
	Twp. 27N	Pge. 11W
	Is gas actually connected? No	When WOPL

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-7-85	Date Compl. Ready to Prod. 3-16-85		Total Depth 5850		P.B.T.D. 5808			
Elevations (DF, RKB, RT, GR, etc.) GR-5954', KB 5967'	Name of Producing Formation Gallup		Top Oil/Gas Pay 5660		Tubing Depth 5772			
Perforations 5660, 5662, 5664, 5666, 5668, 5724, 5726, 5728, 5730, 5732, 5734, 11 shots					Depth Casing Shoe 5850			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8"		307		200 sx c1 "B" w/2% CaCl <sub>2</sub>			
7 7/8"	4 1/2"		5850		6 1/2# /sx Celloflake			
	2 3/8"		5772		See back			

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)

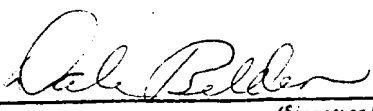
Date First New Oil Run To Tanks 3-15-85	Date of Test 3-17-85	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 60	Casing Pressure 100	Choke Size ----
Actual Prod. During Test 17 bbls	Oil-Bbls. 17	Water-Bbls. 0	Gas-MCF 80

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

  
Dale Belden  
(Signature)  
District Clerk  
(Title)  
March 20, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 26 1985, 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 completed wells.

Casing Cemented as Follows:

3 stages

1st stage- 350 sx C1 "B" w/10% salt

2nd stage - DV tool at 4531' - 550 sx 50-50  
pozmix w/2% gel & 1/4#/sx celloflake

3rd stage - DV tool @ 1891' - 440 sx 65-35 pozmix  
w/12% gel followed by 100 sx C1 "B"