

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator CHAPARRAL OIL & GAS COMPANY	Well API No. 30-045 2061200
Address c/o Walsh Engr. & Prod. Corp. P. O. Drawer 419 Farmington, New Mexico 87499	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Francis	Well No. 1	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. SF-047039C
Location Unit Letter L : 1850 Feet From The South Line and 790 Feet From The West Line Section 18 Township 28N 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 type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Sunterra Gas Gathering Company	P.O. Box 26400 Albuquerque, N.M. 87125					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? Yes	When ?
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						
Date Spudded 2/17/70	Date Compl. Ready to Prod. 1/20/92		Total Depth 2023'		P.B.T.D. 1896'			
Elevations (DF, RKB, RT, GR, etc.) 5835'GR, 5846'KB	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 1664'		Tubing Depth 1874'			
Perforations 1664'-1668'; 1725'-1740'; 1786'-1794'; 1876'-1894'					Depth Casing Shoe 2023'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	7-5/8"		112'		94 ft.3			
6-3/4"	4-1/2"		2023'		558 ft.3			
	1 1/2		1874					

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 Tank -	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test - MCF/D 220	Length of Test 3 hrs.	Bbls. Condensate/MMCF None	OIL CON. DIV DIST. 3
Testing Method (pilot, back pr.) Pitot Tube	Tubing Pressure (Shut-in) 182	Casing Pressure (Shut-in) 182	
Choke Size None			

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

FOR: **CHAPARRAL OIL & GAS COMPANY**

ORIGINAL SIGNED BY

Signature Ewell N. Walsh	Agent
Printed Name January 20, 1992	Title 505 327-4892
Date	Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JAN 30 1992**

By **Original Signed by FRANK T. CHAVEZ**

Title **SUPERVISOR DISTRICT III**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.