

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

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

I. Operator
Sinclair Oil & Gas Company

Address:
601 Denver Club Building Denver, Colorado

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of:
Recompletion: ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Krause Federal WN	Well No. 4	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal
Location Unit Letter B ; 800 Feet From The North Line and 1590 Feet From The East Line of Section 33 , Township 28 North Range 11 West , 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"/> No Wood Corporation	Address (Give address to which approved copy of this form is to be sent) Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990 Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 33	Twp. 28N	Rge. 11W	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number: **None**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 12-13-64	Date Compl. Ready to Prod. 2-26-65	Total Depth 6525'	P.R.T.D. 6488'					
Pool Basin Dakota	Name of Producing Formation Graneros - Dakota	Top Oil/Gas Pay 6339	Tubing Depth 6318'					
Perforations Graneros 6339-43' Dakota 6398-6434'			Depth Casing Shoe 6523'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"OD 21# J-55		353'		240 sz			
7-7/8"	4-1/2"OD 10.5# J-55		6523'		1st Stage 400 Sz, 2nd			
2 3/8"	2-3/8"OD 4.8# J-55 EUE		6318'		Stage 836 sz 119 on ft			

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 None	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 3785	Length of Test 24 hrs	Bbls. Condensate/MMCF 30	Gravity of Condensate 60
Testing Method (pitot, back pr.) Pitot	Tubing Pressure 225#	Casing Pressure 800#	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.

Clyde C. Logan
(Signature)
Senior Clerk
(Title)
March 25, 1965
(Date)

OIL CONSERVATION COMMISSION
APPROVED **APR 1 1965**
Original Signed By
BY **A. R. KENDRICK**
TITLE **PETROLEUM ENGINEER DIST. NO. 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 Sections I, II, III, and VI only 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.