

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

Operator BHP PETROLEUM (AMERICAS) INC.		Well API No. 30-045-07144
Address P.O. BOX 977 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 GALLEGOS CANYON UNIT	Well No. 34	Pool Name, Including Formation BASIN FRUITLAND COAL	Kind of Lease State, Federal or Fee	Lease No. SF078828-A
Location				
Unit Letter K	1650	Feet From The SOUTH Line and 1650	Feet From The WEST Line	
Section 28	Township 28N	Range 12W	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"/> Water 564250	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"/> EL PASO NATURAL GAS 564230	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 4990 FARMINGTON, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? YES	When? 1953

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 <input checked="" type="checkbox"/>	New Well	Workover <input checked="" type="checkbox"/>	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 05-17-53	Date Compl. Ready to Prod. 02-14-94		Total Depth 1423'		P.B.T.D. 1351'			
Elevations (DF, RKB, RT, GR, etc.) 5663' DF	Name of Producing Formation FRUITLAND COAL		Top Oil/Gas Pay 1335'		Tubing Depth 1346'			
Perforations 1335' - 47'					Depth Casing Shoe 1353'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	9 5/8" 32.3#		81'		90 SK			
8 3/4"	7" 23# & 17#		1353'		100 SK NEAT			
	2 3/8" 4.7#		1346'					

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	Choke Size MAR 9 4 1994
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF OIL CON. DIV.

GAS WELL

Actual Prod. Test - MCF/D 170	Length of Test 24 HRS	Bbls. Condensate/MMCF N/A	Gravity of Condensate N/A
Testing Method (pilot, back pr.) BACK PR.	Tubing Pressure (Shut-in) 141	Casing Pressure (Shut-in) 148	Choke Size 3/8

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.

FRED LOWERY
Signature
OPERATIONS SUPERINTENDENT
Printed Name
03-02-94 (505) 327-1639 Title
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **MAR 2 1 1994**

By **ORIGINAL SIGNED BY ERNIE BUSCH**

Title **DEPUTY OIL & GAS INSPECTOR, DIST. #**

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 well in multiply completed wells.