Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION -

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drawer DD, Anesia, NM \$8210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	TOTR	ANSPORT OIL	AND NATURAL GA	S			
Operator	Wall API No.				,		
BHP PETROLEUM (AMERICA Address	30-045-28119						
	N. NM 874	00					
Reason(s) for Filing (Check proper box)	7N, NM 074	<i></i>	Other (Please explain	n)			
New Well	Change	in Transporter of:		•			1
Recompletion		Dry Gas					
Change is Operator	Casinghead Gas [Condensate					
f change of operator give name and address of previous operator							
• •				·-····································		 	
II. DESCRIPTION OF WELL A Lease Name		Bast Mana last dia	- F	Kind of	/ 1	1	u No.
GALLEGOS CANYON UNIT	502		CTURED CLIFFS		ederal or Fee	Lesi	# NO.
Location	1 302	1 11. 10.2				J	
Unit LetterE	. 1580	Feet From The NO	ORTH Line and 98	30 F	4 From The	WEST	Lise
Section 18 Township	29N	Range 12W	, NMPM,	SAN JU	JAN		County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS							
Name of Authorized Transporter of Oil	or Cond		Address (Give address to wh	ich approved	copy of this for	n is to be sent	,
				¥ * · · · ·		· · ·	
Name of Authorized Transporter of Casinghead Clas or Dry Gas X Address (Give address to which approved copy of this form u to be tend)							
	PETROLEUM (AMERICAS) INC. P.O. BOX 977 FARMINGTON, NM 87499						
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rgs.	is gas actually connected?	When	7		
	l!		NO				نــــــــــنــ
If this production is commingled with that find the complete of the complete o	rom any other lease	or pool, give commingli	ng order number:				
TO COMPERIOR DATA	Oil W	ell Gas Well	New Well Workover		Plug Back S	ana Basis	Diff Resiv
Designate Type of Completion -	· (X)	1 X	X I	Deepes -	i Flug Dack j.	WINE WEST	1
Date Spudded	Date Compl. Ready	to Prod.	Total Depth	l	P.B.T D.		
11-18-91	01-17-91		1595'		1539'		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Cee Pay		Tubing Depth		
5503 GR	<u> W. KUTZ PI</u>	CTURED CLIFF	1429'			1585.85	<u> </u>
1429'-1444' @ 4JSPF (60 halas 0	30" in dia	١		Depth Casing	Shoe	
1429 - 1444 @ 403FF (5	<u> </u>		
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
8-3/4"	7" 20#		143'		130 sxs "B" + additives		
6-1/4"	4-1/2" 10.5#		1586'		185 sxs "B" 50/50 poz.		
							dditives
V TEST DATA AND DECLIES	2-3/8" 4.7# 1585.85' A AND REQUEST FOR ALLOWABLE						
			h		4 .1 . 4		i
Date First New Oil Rua To Tank	Date of Test	me oj toda ou ana must	be equal to or exceed top allo Producing Method (Flow, pu	ma ear lift a		THE POW	FIN
	Table 102		Troubling Interior (From, pa	erφ, gaz işi, i	"(D) E		o =
Length of Test	Tubing Pressure		Casing Pressure		Size	0.10	11/
	Oil - Bbia.		Water - Bola.		NOV 8 1991.		
Actual Prod. During Test					"OIL CON. DIV.		
<u></u>	<u> </u>						
GAS WELL					1	DIST. 3	ļ
Actual Prod. Test - MCF/D	Length of Test	_	Bols. Condensate/MMCF		- Gravity of Co	on den sale	
372 Testing Method (puor, back pr.)	24 Tubing Pressure (S	HOURS	0	····		N/A	
TEST SEPARATOR-BACK F	\		Casing Pressure (Shut-in)		Choke Size	2 (01)	
VI. OPERATOR CERTIFIC	<u> </u>	ARITANCE	112		<u>. L</u>	3/8"	
I hereby certify that the rules and regula	OIL CON	OIL CONSERVATION DIVISION					
Division have been complied with and that the information gives above			NOV 0 8 1991				
is true and complete to the best of my i	Date Approve		MUTUO	1551			
Signature Signature			By But Chang				
FRED LOWERY OPERATIONS SUPT.			SUPERVISOR DISTRICT #3				
Printed Name Title			Title	wn	ייטטח טוג	and 1	7 3
11-07-91 Date		327 <u>-1639</u>	11110		· · · · · · · · · · · · · · · · · · ·		
		Telephone No.					

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.