

APPLICATION FOR MULTIPLE COMPLETION

Northwest Pipeline Corp. Rio Arriba 1-6-86
Operator County Date
P.O. Box 90 - Farmington, NM Rosa Unit #108
Address Lease Well No.
G 7 31N 5W
Location Unit Section Township Range
of Well

All Applicants for multiple completion must complete Items 1 and 2 below.

1. The following facts are submitted:	Upper Zone	Intermediate Zone	Lower Zone
a. Name of Pool and Formation	Undes. Gallup		Basin Dakota
b. Top and Bottom of Pay Section (Perforations)	6886'-7178'		7828'-7974'
c. Type of production (Oil or Gas)	Gas		Gas
d. Method of Production (Flowing or Artificial Lift)	Flowing	RECEIVED JAN 22 1986 OIL CON. DIV. DIST. 3	Flowing
e. Daily Production <input type="checkbox"/> Actual <input checked="" type="checkbox"/> Estimated Oil Bbls. Gas MCF Water Bbls.	IP test - 3360 MCF/D		IP test - 2285 MCF/D

2. The following must be attached:

- Diagrammatic Sketch of the Multiple Completion, showing all casing strings, including diameters and setting depths, centralizers and/or turbolizers and location thereof, quantities used and top of cement, perforated intervals, tubing strings, including diameters and setting depth, location and type of packers and side door chokes, and such other information as may be pertinent.
- Plat showing the location of all wells on applicant's lease, all offset wells on offset leases, and the names and addresses of operators of all leases offsetting applicant's lease.
- Electrical log of the well or other acceptable log with tops and bottoms of producing zones and intervals of perforation indicated thereon. (If such log is not available at the time application is filed it shall be submitted as provided by Rule 112-A.)

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

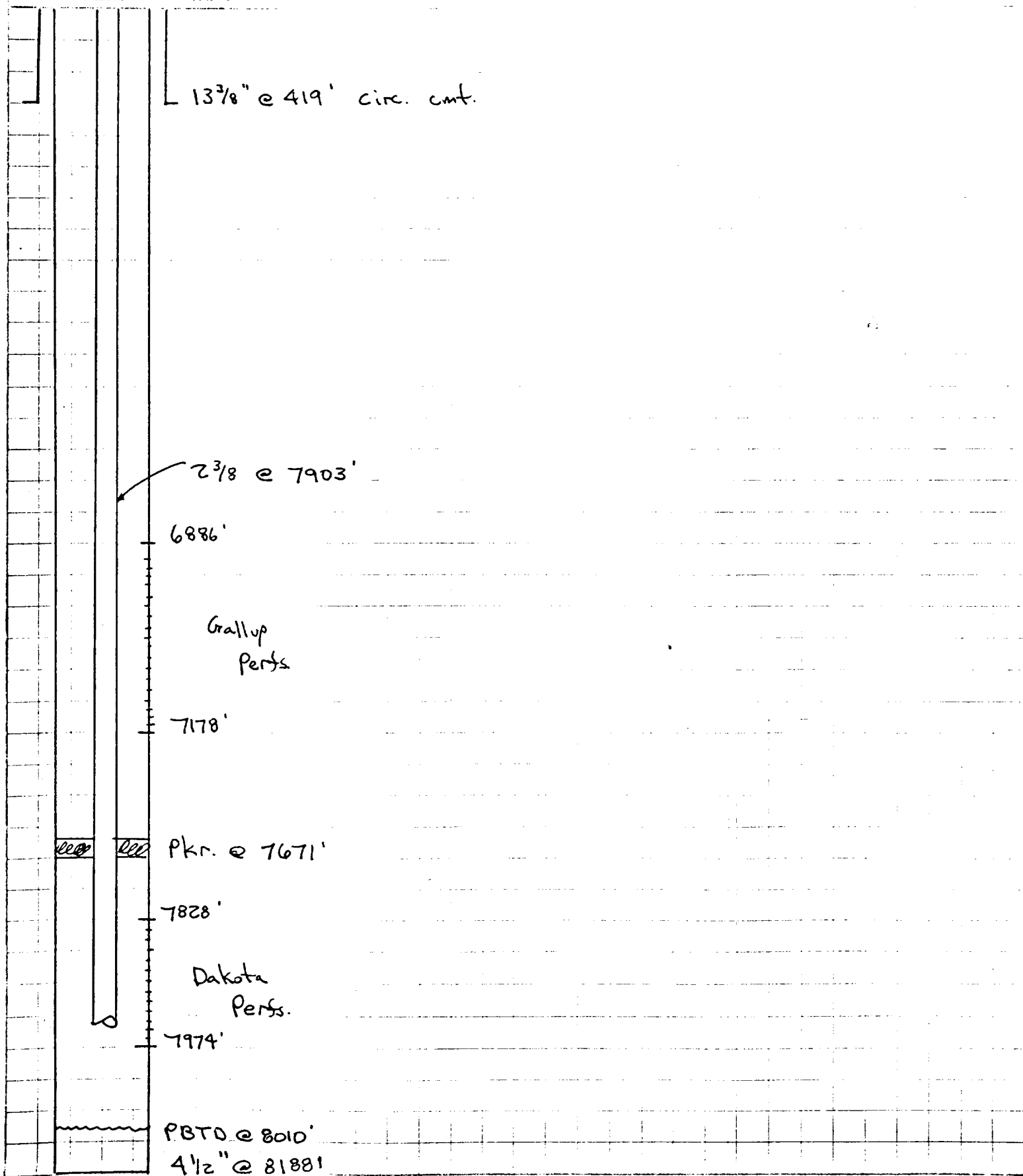
Signed M. J. Turnbaugh Title Senior Engineer Date 1-6-86

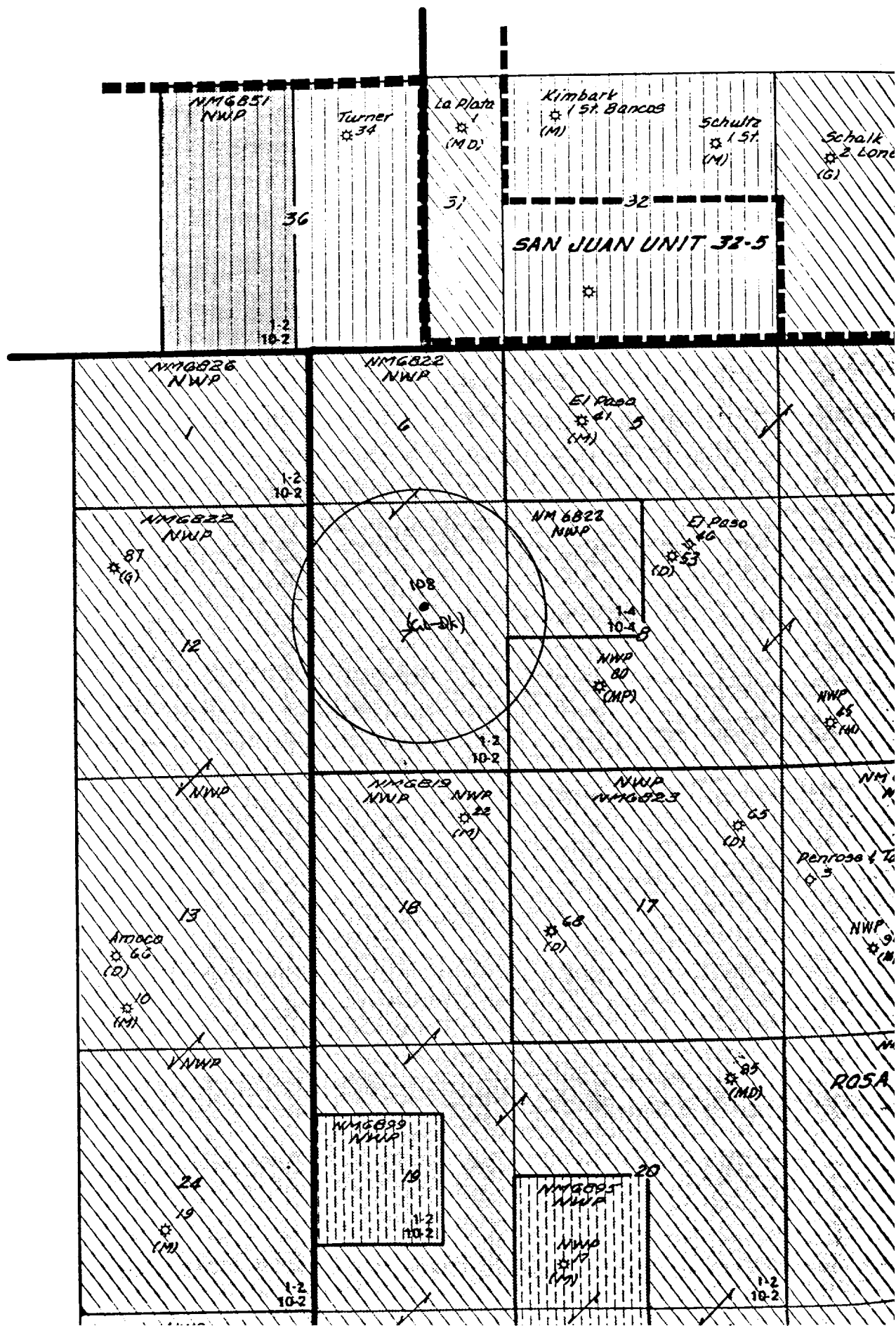
(This space for State Use)

Approved Original Signed by FRANK T. CHAVEZ Title SUPERVISOR DISTRICT # 3 Date JAN 22 1986

NOTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard proration unit in one or more of the producing zones, then separate application for approval of the same should be filed simultaneously with this application.

Rosa Unit * 108 (46-DB)
Wellbore Diagram





STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
SEP 19 1985
OIL CON. DIV.
DIST. 3

I. Operator
Northwest Pipeline Corporation

Address
P.O. Box 90 - Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	Change of Operator
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas
		<input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner Amoco Production Co. - 501 Airport Dr. - Farmington, NM 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rosa Unit	Well No. 108	Pool Name, including Formation Undesignated Gallup	Kind of Lease State Federal XXX	Lease No. SF0787
Location Unit Letter <u>G</u> ; <u>1850</u> Feet From The <u>North</u> Line and <u>1720</u> Feet From The <u>East</u> Line of Section <u>7</u> Township <u>31N</u> Range <u>5W</u> , NMPM, <u>Rio Arriba</u> Cour				

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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline Corporation	P.O. Box 90 - Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	No

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Barrie Harrison

Production & Drilling Clerk

9-6-85

(Title)

(Date)

OIL CONSERVATION DIVISION
JAN 22 1986

APPROVED _____, 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 deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of ownership, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multi-completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res.
			X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
9-8-84	11-12-84		8188'		8010'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
6288' KB	Undesignated Gallup		6886'						
Perforations						Depth Casing Shoe			
6886'-7178'						Packer set at 7671'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8"		419'		438 cu.ft.				
7-7/8"	4-1/2"		8188'		4301 cu.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	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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
AOF=2842 Q=2366 MCF/D	3 hrs.	----	----
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back pressure	3150	3150	2" X .750"

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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Other (Please explain)
Change of Operator

If change of ownership give name and address of previous owner: Amoco Production Co. - 501 Airport Dr. - Farmington, NM 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rosa Unit	Well No. 108	Pool Name, including Formation Basin Dakota	Kind of Lease State Federal State	Lease SF0787
Location				
Unit Letter G	: 1850	Feet From The North	Line and 1720	Feet From The East
Line of Section 7	Township 31N	Range 5W	, NMPM, Rio Arriba	

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)
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NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Carrie Harmon

(Signature)

(Title)

9-6-85

(Date)

OIL CONSERVATION DIVISION

JAN 22 1986

APPROVED

BY

Original Signed by FRANK T. CHAVEZ

TITLE

SUPERVISOR DISTRICT # 3

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			X	X					
Date Spudded 9-8-84	Date Compl. Ready to Prod. 11-12-84	Total Depth 8188'		P.B.T.D. 8010'					
Elevations (DF, RKB, RT, GR, etc.) 6288' KB	Name of Producing Formation Basin Dakota	Top Oil/Gas Pay 7828'		Tubing Depth 7903'					
Perforations 7828'-7926'							Depth Casing Shoe Packer set at 7671'		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8"		419'		438 cu.ft.				
7-7/8"	4-1/2"		8188'		4301 cu.ft.				
	2-3/8"		7903'						

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	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 AOF=2337 Q=2270 MCF/D	Length of Test 3 hrs.	Bbls. Condensate/MACF ----	Gravity of Condensate ----
Testing Method (plug, back pr.) Back pressure	Tubing Pressure (shut-in) 2211	Casing Pressure (shut-in)	Choke Size 2" X .750"