STATE OF NEW MEXICO CNERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-107 Revised 2-1-82

APPLICATION FOR MULTIPLE COMPLETION

Northwest Pipeline Corp.	· Rio Arril	oa 1-6-8	
Operator	County	Date	,
P.O. Box 90 - Farmington	, NM Rosa Uni Lease	t #108 Well No	•
G ·	7 31N	5W	·
	tion Township	Range	
All Applicants for multipl	e completion must com	plete Items 1 and 2 be	elow.
1. The following facts are submitted:	Upper Zone	Intermediate Zone	· Lower Zone
 Name of Pool and Formation 	Undes. Gallup		Basin Dakota
b. Top and Bottom of			4
Pay Section (Perforations)	6886'-7178'		7828'-797#'
c. Type of production (Oil or Gas)	Gas	•	Gas:
 d. Method of Production (Flowing or Artificial Lift) 	Flowing	SIVED	Flowing
e. Daily Production Actual		i//1221986	
X Estimated	Ç. İv.	CON. DIV.	
Oil Bbls. Gas MCF Water Bbls.	IP test - 3360 MCF/D	DIST. 3	IP test - 2285 MCF/D
2. The following must be a	ttached:		
quantities used and t diameters and setting other information as h. Plat showing the loca	depths, centralizers op of cement, perfora depth, location and depth and depth and depth and depth of all wells on a	and/or turbolizers and ted intervals, tubing type of packers and signolicant's lease, all	nd location thereof, strings, including lide door chokes, and such
c. Electrical log of the	well or other accept:	able log with tops and reon. (If such log is	offsetting applicant's le d bottoms of producing zo d not available at the dule 112-A.)
I hereby certify that the	information above is	true and complete to t	the best of my knowledge
Signed M.A. Turnbaugh	TitleSenior Eng	ineer Date	1-6-86
(This space for State Use)			JAN 22 1986
Approve G tigRoal <u>Signed by FRANK T.</u>	CHAVEZ Title SUPERV	/ISOR DISTRICT # 3	Date
and/or a non-stand	ltiple completion will ard proration unit in on for approval of the		roducing zones, then

this application.

Rosa Unit * 108 (CC-DL) Wellbore Diagram

g March Collins and I was	wellbore Dia	gran	
			
133/8	"e 419' circ. cmt.		
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	en e	<u> </u>	
73/8	e 7903'		
	<u> </u>	The second secon	· · · · · · · · · · · · · · · · · · ·
1 6886,			
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Gra	Nup Perts	. <u></u>	·• · · · · ·
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7178			
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Dake			· · · · · · · · · · · · · · · · · · · ·
1 1 10 1	Perts.		
1974'			
PBT0.	5 8010,		
1/2"C	2 81881		

La Plata Turner Schultz \$151. schalk 2 cone (MO) are) 36 SAN JUAN UNIT 32-5 WMG822 WWR NWA NWA Eranoa #41 10-8 NM 8822 MAR E Paso Poles **8**7 461 168 (40-July 10-4 XINO SU White and FOMPY 10-2 THE STATE WAY. who ses XXXX Renrose & To NWP 9 Amoca (2) XXX TMO) NWA 205A 1445.899 1449 11-2 10-2 10-5

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STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE			-
TRANSPORTER	OIL		
	GAL		
OPERATOR			
PROBATION OFF	HC E		

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

RAL GAS SED

OPERATOR		•	AND		₩ &	- 10 A B	
PROBATION OFFICE	AUTHORIZ.	ATION TO TRANS	SPORT OIL	_ AND NATU	RAL GAS SER	I VE	~
Operator							<u>ר</u> מי
Northwest Pipeline C	ornoration	eš			Off Contract	9/985]
Address	01 001 001011						<u> </u>
P.O. Box 90 - Farmin	gton, New Mex	ico 87499			0/57.	1985 LL	
Resson(s) for filing (Check proper t	oz j			Other (Please	explain)		
X New Well	Change in Ti	ansporter of:		Change o	f Operator		
Recompletion	OII		Dry Gas	on ange o	· operator		
Change in Ownership	Casingh	ead Gas 🔲 (Condensate				
If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL A	ND LEASE	of Name, Including F		ort br	Kind of Lease	NM 87401	Logse
Rosa Unit	1108 U	ndesignated	Gallun		\$(\$()% Federal}()() (R)	Mah/	SF0787
Location	7100 10	nacs rgna cca	<u>uu i i up</u>		NAV		<u> </u>
Unit Letter G : 1	850 Feet From T	no North Li	ne and	1720	Feet From The	East	· · ·
Line of Section 7	Township 31N	Range	5W	, NMPM	F	Rio Arriba	Cou
III. DESIGNATION OF TRAN	SPORTER OF OIL	AND NATURA	L GAS	Give address i	o which approved co	py of this form is i	to be sent)
Name of Authorized Transporter of C	asingnead Gas 💢	or Dry Gas	Address (Give address t	o which approved co	py of this form is	io be senti
Northwest Pipeline C			1		Farmington,		•
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge.		NO			-
f this production is commingled to			give comm		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.

Carrie Hainen	国
Production & Drilling Clerk	 .
9-6-85	

(Date)

OIL	CONSE	RVATIO	DIA BIA	ISION	1986
			Unit	A W	1000
D					19

APPROVED	9 7117 D R 1500
BY	Original Signad by FRANK I. 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 deepe well, this form must be accompanied by a tabulation of the devia tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of own well name or number, or transporter, or other such change of condit

Separate Forms C-104 must be filed for each pool in multicompleted wells.

Designate Type of Complet	ion - (X)	OII Well	Gas Well	X New Well	Workover	Deepen	Plug Back	Same Resty.	DIIL R
Date Spudded	Date Comp.	. Ready to P	rod.	Total Depti	<u>: </u>	<u> </u>		<u> </u>	<u> </u>
9-8-84	11.	-12-84			8188'		P.B.T.D.	\ 1	
Elevations (DF, RKB, RT, CR, etc.)		oducing Form	action	Top OII/Go			8010		 .
6288' KB	Unc	designate	ed Gallup		6886'		Tubing Dept	ıh	
Periorations			ca darrup	'1	0000		Doorth Cont		
<u>6886'-7</u> 178'							Depth Casin		
		TUBING.	CASING, AND	CEUENTI	NC RECORD		Packer	set at 76)/ ,
HOLE SIZE	CASI	NG & TUBIA		I					
17-1/2"		3/8"	10 3/22		419'	<u> </u>		CXS CEMEN	<u> </u>
7-7/8"		·1/2"						cu.ft.	
	<u> </u>	1/ 5		 	8188'		4301	cu.ft.	
. TEST DATA AND REQUEST	FOR ALLO	WABLE (T	est must be a	ter recovery	of total value	of land all			
7. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks	FOR ALLO		est must be a; ble for this de		of total volume ull 24 hours) ethod (Flow,			ual to or exce	id top ai
Date First New Oil Run To Tanks		t	est must be a; ble for this de		ethod (Flow,			ual to or sucs	ed top al
Oate First New Cil Run To Tanks	Date of Tee	t	ess must be as ble for this de	Producing M	ethod (Flow,		(i, eic.)	ual to or exce	od top a
Length of Test AS WELL	Date of Tee Tubing Pres	t Euro	ess must be a; ble for this de	Producing M	ethod (Flow,		Choke Size	ual to or suce	ed top al
ength of Test atual Prod. During Test AS WELL ctual Prod. Test-MCF/D	Date of Tee Tubing Pres Oil-Bbis.	eme	est must be a; ble for this de	Producing M Casing Pres Water-Bbis.	ethod (Flow,		Choke Size Gas-MCF		ed top ai
AS WELL cruai Prod. Test-MCF/D OF=2842 Q=2366 MCF/D	Date of Tee Tubing Pres Oil-Bbis.	awe sat	est must be a ble for this de	Producing M	ethod (Flow,		Choke Size		ed top a
Oate First New Oil Run To Tanks Length of Test Letual Prod. During Test	Date of Tee Tubing Pres Oil-Bbis. Length of Te	ewe		Producing M Casing Pres Water-Bbis. Bbis. Conde	ethod (Flow,	pump, gas li	Choke Size Gas-MCF		ed cop al

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

9-6-85

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LAND OFFICE			
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	GAS		
OPERATOR			
PROBATION OFF	VC W		

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

Fill out only Sections I, II, III, and VI for changes of ow well name or number, or transporter, or other such change of condit

Separate Forms C-104 must be filed for each pool in mult completed wells.

TRANSPORTER DIL REC	UEST FOR ALLO	DWABLE DECEIVE	
AUTHORIZATION T			الا
Operator		SEP 1 9 1985	
Northwest Pipeline Corporation	•	OIL CON DIV	;
Address		OIR COLUMN	
	37499	DIST. 3	
Reason(s) for filing (Check proper box)		Other (Please expiain)	
New Well Change in Transporter		Change of Operator	
Recompletion OII	Dry Gas		
Change in Ownership Casinghead Gas	Condensate		
If change of ownership give name Amoco Production and address of previous owner Amoco Production	on Co 501	Airport Dr Farmington, NM	87401
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name,		Kind of Lease	Lease
Rosa Unit 108 Basin D)akota	SX¢(≰ Federal ≯X R¥	SF0787
Location		1700	
Unit Letter G : 1850 Feet From The Nor	'TN Line and	1/20 Feet From The East	
Line of Section 7 Township 31N	Range 5W	, ммрм. Rio Arr	iba cou
III. DESIGNATION OF TRANSPORTER OF OIL AND N	SATTIRAL CAS	•	
Name of Authorized Transporter of Oil or Condensate		a (Give address to which approved copy of this fo	orm is to be sent)
Name of Authorized Transporter of Casinghead Gas 💢 💮 or Dry G	as Addres	s (Give address to which approved copy of this fo	orm is to be sent)
Northwest Pipeline Corporation	P.C	Box 90 - Farmington, NM 8	37499
If well produces oil or liquids, Unit Sec. Twp.	Rge. is gas	actually connected? When	
give location of tanks.		No	
If this production is commingled with that from any other leas	e or pool, give con	nmingling order number:	
NOTE: Complete Parts IV and V on reverse side if neces.	sary.		
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISIO)N
			2 1986
I hereby certify that the rules and regulations of the Oil Conservation Di- been complied with and that the information given is true and complete to	vision have APPI		, 19
my knowledge and belief.	BY_	Oritinal Stand by ISAGEK T. CHA	VEZ"
			TRIOT III 0
Λ 1	TITL	E SUPERVISOR DIST	IFICI # 8
Carin Harrison	\mathcal{R}	This form is to be filed in compliance with	RULE 1104.
(Signature)		f this is a request for allowable for a newly	y drilled or deep
Production & Drilling Clerk	well,	this form must be accompanied by a tabula taken on the well in accordance with MUL	ition of the devi-
(Title)	<i>,</i>	All sections of this form must be filled out	
9-6-85	able	on new and recompleted wells.	

Designate Type of Completi		OII Meff	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv	Ditt. Re
Date Spudded	Date Compl	. Ready to F	rod.	Total Depti			P.B.T.D.		<u> </u>
9-8-84	11-	12-84			8188'		8010	γ ι	
Elevations (DF. RKB, RT, GR, ste.,	Name of Pr	oducing Fora	ngilon	Top OII/Go					
6288' KB	Bas	in Dako	ta 🕶		7828'		Tubing Dep		
Perforations				1					
7828' - 7926'							Depth Casts	ng shoo (er set a	+ 7671
		TUBING.	CASING, AND	CEMENTI	NC PECOPI		rack	er set a	L /0/1
HOLE SIZE	CASI	NG & TUBI	NG SIZE					·	
17-1/2"		3/8"	NG SIZE	 	419'	<u> </u>		CKS CEME!	4T · `
7-7/8"		1/2"					438	Cu.ft.	
		· / -		<u> </u>	8188'		4301	cu.ft.	
- -	1 2	*) (())							
		3/8" WABLE (7	Test must be as	ter recovery o	7903'	of load oil	and must be se	and to see and	
7. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks		WABLE (7	Fest must be ajuble for this de	, , , , , , , ,	of total volue			qual to or exc	sed top ali
7. TEST DATA AND REQUEST OIL WELL	FOR ALLO	WABLE 17	Fest must be af able for this de	, , , , , , ,	of total volum full 24 hours) ethod (Flow,			qual to or exc	ed top ali
7. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks	FOR ALLO	WABLE 17	Fest must be aj ble for this de	Producing M	of total volum full 24 hours) ethod (Flow,		(t, etc.)	qual to or exc	ed top all
7. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test	FOR ALLO Date of Tea	WABLE 17	Fest must be aj ible for this de	Producing M	of total volum full 24 hours) ethod (Flow,		ft, etc.)	qual to or exc	sed top all
7. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test AS WELL	FOR ALLO Date of Tea	WABLE Of a	Fest must be aj ible for this de	Producing M	of total volum full 24 hours) ethod (Flow,		(t, etc.)	qual to or exc	sed top al
7. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	FOR ALLO Date of Teat Tubing Pres	WABLE (1)	Fest must be aj ble for this de	Producing M Casing Pres Water-Bbls.	of total volum full 24 hours) ethod (Flow,		Choke Size Choke Size Gas-MCF		sed top al
Actual Prod. Test-MCF/D AGE ACTUAL Prod. Test-MCF/D FOR ALLO Date of Teat Tubing Pres Oil-Bbis.	WABLE (1)	Feet must be aj ible for this de	Producing M	of total volum full 24 hours) ethod (Flow,		(t, etc.)		ed top al	
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