

# OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Select section  
at Bottom of Page

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                                                                                                                                     |                                         |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------|
| Operator<br><b>PHILLIPS PETROLEUM COMPANY</b>                                                                                       |                                         | Well AM No.                         |
| Address<br><b>300 W. Arrington, Suite 200, FARMINGTON, NM 87401</b>                                                                 |                                         |                                     |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)                                             |                                         |                                     |
| New Well <input type="checkbox"/>                                                                                                   | Change in Transporter of:               |                                     |
| Recompletion <input type="checkbox"/>                                                                                               | Oil <input type="checkbox"/>            | Dry Gas <input type="checkbox"/>    |
| Change in Operator <input checked="" type="checkbox"/>                                                                              | Casinghead Gas <input type="checkbox"/> | Condensate <input type="checkbox"/> |
| If change of operator give name and address of previous operator <b>Northwest Pipeline Corp., 3535 E. 30th Farmington, NM 87401</b> |                                         |                                     |

### II. DESCRIPTION OF WELL AND LEASE

|                                                                                                                                                                                                                          |                      |                                                               |                                          |           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------------------|------------------------------------------|-----------|
| Lease Name<br><b>AZTEC COM</b>                                                                                                                                                                                           | Well No.<br><b>3</b> | Pool Name, including Formation<br><b>AZTEC PICTURE CHIEFS</b> | Kind of Lease<br>State, Federal or Prop. | Lease No. |
| Location<br>Unit Letter <b>H</b> : <b>1730</b> Feet From The <b>North</b> Line and <b>910</b> Feet From The <b>East</b> Line<br>Section <b>32</b> Township <b>30N</b> Range <b>10W</b> , <b>NMPM</b> , Rio Arriba 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"/><br><b>Gary Energy</b>                     | Address (Give address to which approved copy of this form is to be sent)<br><b>P.O. Box 159, Bloomfield, NM 87413</b> |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/><br><b>El Paso Natural Gas Co.</b> | Address (Give address to which approved copy of this form is to be sent)                                              |
| If well produces oil or liquids, give location of tanks.                                                                                                   | Unit Sec. Twp. Rge. Is gas actually connected? When?                                                                  |

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 | New Well        | Workover | Deepen       | Plug Back         | Same Ref'd | Diff Ref'd |
| Date Spudded                               | Date Compl. Ready to Prod.  |          | Total Depth     |          | P.B.T.D.     |                   |            |            |
| Elevations (DF, RKB, RT, GA, etc.)         | Name of Producing Formation |          | Top Oil/Gas Pay |          | Tubing Depth |                   |            |            |
| Perforations                               |                             |          |                 |          |              | Depth Casing Shoe |            |            |
| <b>TUBING, CASING AND CEMENTING RECORD</b> |                             |          |                 |          |              |                   |            |            |
| HOLE SIZE                                  | CASING & TUBING SIZE        |          | DEPTH SET       |          | SACKS CEMENT |                   |            |            |
|                                            |                             |          |                 |          |              |                   |            |            |
|                                            |                             |          |                 |          |              |                   |            |            |
|                                            |                             |          |                 |          |              |                   |            |            |

### 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            |
| Actual Prod. During Test                                                                                                                                | Oil - Bbls.               | Water - Bbls.                                 | Gas - MCF             |
| <b>GAS WELL</b>                                                                                                                                         |                           |                                               |                       |
| Actual Prod. Test - MCF/D                                                                                                                               | Length of Test            | Bbls. Condensate/MMCF                         | Gravity of Condensate |
| Testing Method (pilot, back pr.)                                                                                                                        | Tubing Pressure (Shut-In) | Casing Pressure (Shut-In)                     | Choke Size            |

### 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.

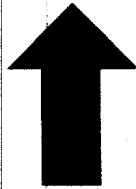
Signature *L.E. Robinson*  
L.E. Robinson Sr. Dir. & Prod. Eng.  
Printed Name \_\_\_\_\_ Title \_\_\_\_\_  
Date **APR 01 1991** (505) 599-3412 Telephone No. \_\_\_\_\_

### OIL CONSERVATION DIVISION

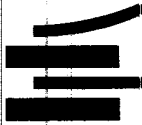
Date Approved **APR 01 1991**  
By *[Signature]*  
Title **SUPERVISOR DISTRICT #3**

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.



**LTR**



**Job separation sheet**

District I  
PO Box 1908, Hobbs, NM 88241-1908  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brames Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Form C-104  
Revised February 10, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

|                                                                                               |                                    |                                                                                                 |
|-----------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------|
| Operator name and Address<br>Merrion Oil & Gas Corp.<br>P. O. Box 840<br>Farmington, NM 87499 |                                    | OGRID Number<br>014634                                                                          |
|                                                                                               |                                    | Reason for Filing Code<br>CH - Change of Operator 8/01/95<br>CO - Change oil transporter 8/1/95 |
| API Number<br>30-045-09021                                                                    | Pool Name<br>Aztec Pictured Cliffs | Pool Code<br>71280                                                                              |
| Property Code<br>17304                                                                        | Property Name<br>Aztec Com         | Well Number<br>3                                                                                |

II. Surface Location

|                    |               |                 |              |                 |                       |                           |                      |                        |                      |
|--------------------|---------------|-----------------|--------------|-----------------|-----------------------|---------------------------|----------------------|------------------------|----------------------|
| UL or lot no.<br>H | Section<br>32 | Township<br>30N | Range<br>10W | Lot Idn<br>SENE | Feet from the<br>1730 | North/South Line<br>north | Feet from the<br>910 | East/West Line<br>east | County<br>Rio Arriba |
|--------------------|---------------|-----------------|--------------|-----------------|-----------------------|---------------------------|----------------------|------------------------|----------------------|

Bottom Hole Location

|               |                       |                     |                     |                      |                       |                  |               |                |        |
|---------------|-----------------------|---------------------|---------------------|----------------------|-----------------------|------------------|---------------|----------------|--------|
| UL or lot no. | Section               | Township            | Range               | Lot Idn              | Feet from the         | North/South line | Feet from the | East/West line | County |
|               |                       |                     |                     |                      |                       |                  |               |                |        |
| Lee Code<br>S | Producing Method Code | Gas Connection Date | C-129 Permit Number | C-129 Effective Date | C-129 Expiration Date |                  |               |                |        |

III. Oil and Gas Transporters

|                   |                                                                   |         |     |                                    |
|-------------------|-------------------------------------------------------------------|---------|-----|------------------------------------|
| Transporter OGRID | Transporter Name and Address                                      | POD     | O/G | POD ULSTR Location and Description |
| 014538            | Meridian Oil Inc.<br>P. O. Box 4289<br>Farmington, NM 87499       | 2098310 | O   |                                    |
| 007057            | El Paso Natural Gas Co.<br>P. O. Box 4990<br>Farmington, NM 87499 | 2098330 | G   |                                    |
|                   |                                                                   |         |     |                                    |
|                   |                                                                   |         |     |                                    |
|                   |                                                                   |         |     |                                    |
|                   |                                                                   |         |     |                                    |

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JUL 27 1995

IV. Produced Water

|                |                                                                |
|----------------|----------------------------------------------------------------|
| POD<br>2098350 | POD ULSTR Location and Description<br>OIL CON. DIV.<br>DIST. 3 |
|----------------|----------------------------------------------------------------|

V. Well Completion Data

|           |                      |           |              |              |
|-----------|----------------------|-----------|--------------|--------------|
| Spud Date | Ready Date           | TD        | PSTD         | Perforations |
|           |                      |           |              |              |
| Hole Size | Casing & Tubing Size | Depth Set | Sacks Cement |              |
|           |                      |           |              |              |
|           |                      |           |              |              |
|           |                      |           |              |              |
|           |                      |           |              |              |

VI. Well Test Data

|              |                   |           |             |               |               |
|--------------|-------------------|-----------|-------------|---------------|---------------|
| Date New Oil | Gas Delivery Date | Test Date | Test Length | Tbg. Pressure | Csg. Pressure |
|              |                   |           |             |               |               |
| Choke Size   | Oil               | Water     | Gas         | AOF           | Test Method   |
|              |                   |           |             |               |               |

I hereby certify that the rules 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.

Signature:

Printed name: George F. Sharpe

Title: Oil & Gas Investment Manager

Date: 7/27/95

Phone: (505) 327-9801

OIL CONSERVATION DIVISION

Approved by:

37.8  
SUPERVISOR DISTRICT #3

Title:

Approval Date:

JUL 27 1995

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Phillips Petroleum Co. (017654)

Printed Name

Ed Hasely

Env Eng.

Title

7/27/95

Date