| 40. OF COPIES WEST | IVES | |
|--------------------|------|--------|
| DISTRIBUTION | | Ī |
| SANTA FE | | Ţ |
| FILE | | 1 |
| U.S.G.S. | | I |
| LAND OFFICE | | T |
| IRANSPORTER | OIL | I |
| | GAS | ! |
| OPERATOR | | T |
| 222471211 | | \top |

| 1 | SANTA FE | | INSERVATION COMMISSION | Form C-104 Supersedes Old C-104 and C-110 | | |
|--|---|---|--|---|--|--|
| ı | FILE | KEWOE31 1 | AND | Effective 1-1-65 | | |
| | U.S.G.\$. | AUTHORIZATION TO TRAN | SPORT OIL AND NATURAL GA | S | | |
| | LAND OFFICE | | | | | |
| ı | TRANSPORTER OIL | | | | | |
| - 1 | GAS OPERATOR | | | | | |
| | PRORATION OFFICE | | | | | |
| I. | Operator | | | | | |
| | BILLY J. F | KMOT1 | | | | |
| Ì | Address | | | | | |
| ļ | | ere 4925 Creenville | Ave. Dallas, Texas | 75206 | | |
| | Reason(s) for filing (Check proper box) New We!1 | Change in Transporter of: | Other (Please explain) | | | |
| - | Recompletion | Oil Dry Gas | | | | |
| | Change in Ownership | Casinghead Gas Condenc | | | | |
| ' | | | | | | |
| | If change of ownership give name and address of previous owner | | | | | |
| | | | | | | |
| 11. | DESCRIPTION OF WELL AND L. Lease Name | EASE Well No., Pool Mane, Including Fc. | rmation Kind of Lease | Lease No. | | |
| | Kelly | la Blanco Mesa | | Fee SFUIIIO | | |
| | Location | , 1, | | | | |
| | Unit Letter 0 1000 | Feet From The SOUTH Line | and 1970 Feet From Th | eEast | | |
| | - | | | | | |
| | Line of Section E Town | ishtp 30 N Rance | 10 W , _{NMPM} , Sal | County | | |
| | PROJECT AMICN OF THE ANCHORT | ED OF OUL AND NATURAL CAS | · | | | |
| III. | DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil X | | | | | |
| | Giant Refinery, I | n c. | P.O. Box 256 Farming Affices (Give address to which approve | ton,N.M. 87499 | | |
| | Name of Authorized Transporter of Cast | nghead Gas 🗶 — or Cry Gas 💢 | Address (Give address to which approve | d copy of this form is to be sent) | | |
| | El Paso Natural G | σ § ∪0• | L.O. C. Jan Ler itta | SOUTH NAME OF STA | | |
| | If well produces oil or liquids, | -Dinit Jen Wi - ≃ le. | off through the comment to the con- | ET PASO TO SET T | | |
| | give location of tanks. | | No met | er point right away! | | |
| | If this production is commingled with | n that from any other lease or pool, g | give commingling order number: | | | |
| IV. | COMPLETION DATA | | New Well Workover Deepen | Flug Back Same Resty, Diff. Resty. | | |
| | Designate Type of Completion | | X | | | |
| | Date Spudded | | Total Depth | P.B.T.D. | | |
| | 12-21-82 | 1-14-83 Name of Freducing Formation | 56121 | 5559 * Tubing Depth | | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Freducing Formation | Top (41.3) is Pary 5.1 (1.5) | 5481 * | | |
| | Bartarillan 5293,529 | Ģ,5\$ĬĬĬĠ\$ ĬŦŸ 53 ?3,533 | h,,5337, 5327,5323, | Depth Casing Shoe | | |
| | 6391 GR 54805 K2 Perforations 5107, 5115, 512 5480, 5499 2 5 | 3,5173,510~,0217,022 503 | 20,5400,0401,5570, | 5610' | | |
| | | TUBING, CASING, AND | CEMENTING RECORD | | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | |
| | 13 3/4" | 9 5/8" | 212 | <u>254</u> | | |
| | 8 3/4" | 711 | <u> 3305</u> 3150 to 5610 | 540 430 | | |
| | 6 1/4" | 4 1/2" (liner) | 3150 to 3610 | 430 | | |
| •• | THE DAME AND DECLIEST FO | DD ALLOWARIE (Test must be as | fter recovery of total volume of load oil a | nd must be equal to or exceed top allow- | | |
| ٧. | TEST DATA AND REQUEST FO | | pth or be for full 24 hours) | | | |
| | Date First New Cil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, | etc.) | | |
| | | | 5 6 6 | CINC IN | | |
| | Length of Teet | Tubing Pressure | Casing Pressure D E U | | | |
| | Actual Prod. During Test | Cil-Bbls. | Water - Bbls. | Gas-MCF | | |
| | Actual Production | , | FEB | 8 - 1983 | | |
| | OIL CON. DIV. | | | | | |
| | GAS WELL | | - | | | |
| | Actual Prod. Test-MCF/D | Length of Tes: | | Switted Condensate | | |
| | AOF=8 827 Testing Method (pitot, back pr.) | 3 hrs. Tubing Pressure (shut-in) | Gasing Pressure (Shut-in) | Choke Size | | |
| | 1 | 592 psig (Shut-in | | | | |
| | Back Press. | <u> </u> | OU CONSERVA | TION COMMISSION | | |
| . VI | . CERTIFICATE OF COMPLIANC | C.E. | | FEB - 1983 | | |
| Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Ashton B. Geren, Jr. | | | OIL CONSERVATION COMMISSION FEB - 1983 | | | |
| | | | 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 allow | able for a newly drilled or deepened lied by a tabulation of the deviation | | |
| tests taken on the went in accordance with | | | | iance with RULE !!!. | | |
| Consultant & Agent for: Billy J. Knott-Opt. | | | All sections of this form mus | All sections of this form must be filled out completely for allowable on new and recompleted wells. | | |
| | | | EIII out only Sections ! II | III and VI for changes of owner, | | |
| | | ate) | well name or number, or transporter, or other auch change of condition | | | |

well name or number, or transporter, or other such changes of owner,

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