

OIL CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-1-78REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

LOBO PRODUCTION

Address

PO Box 2364

Farmington, NM 87499

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

Gas Line Hook up

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name

Mesa Twin-Mounds

Well No.

1

Pool Name, including Formation

Wild Cat Gallup

Kind of Lease

State, Federal or Fee Federal

Lease No.

NM27024

Location

Unit Letter D 790' Feet From The North Line and 990' Feet From The West

Line of Section 30 Township 30N Range 14W, NMPM, San Juan County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒or Condensate ☐

Giant Refinery

Address (Give address to which approved copy of this form is to be sent)

PO Box 256 - Farmington, NM 87499

Name of Authorized Transporter of Casinghead Gas ☒or Dry Gas ☐

El Paso Natural Gas

Address (Give address to which approved copy of this form is to be sent)

Petroleum Club Plaza, Farmington, NM

Does well produce oil or liquids,
give location of tanks.

Unit

D

Sec.

30

Twp.

30N

Rge.

14W

Is gas actually connected?

no

When

April 1, 1984

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

COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Elevations						Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (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)

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
Test Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

Test Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Casing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

(Signature)

Operator

(Title)

3/29/84

(Date)

OIL CONSERVATION DIVISION

APPROVED

APR 29 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 allowable for a newly drilled or deepened
well, this form must be accompanied by a tabulation of the deviation
tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allow-
able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner,
well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple
completed wells.

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DISTRIBUTION	
DATE	
FILE	
RECEIVED	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	
RECEIVED	

LOBO PRODUCTION

Address

P.O. BOX 2364, Farmington, New Mexico 87499

Person(s) for filing (Check proper box)

New Well

☒

Change in Transporter of:

Recompletion

☐

Oil

☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Mesa Twin Mounds	#1	WC Gallup-Basin Dakota	State, Federal or Free Federal	NM27024

Location

Unit Letter D : 790' Feet From The North Line and 990' Feet From The WestLine of Section 30 Township 30N Range 14W , NMPM, San Juan County

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 type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<u>El Paso Natural Gas</u>	<u>Petroleum Club Plaza, Farmington, New M</u>	
Well produces oil or liquids, or location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? When	
	<u>No</u>	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<u>X</u>						
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
<u>6-28-83</u>	<u>7-18-83</u>	<u>5830'</u>	<u>5782'</u>					
Deviations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
<u>5505 KB</u>	<u>Dakota</u>	<u>5545</u> KB	<u>5555' KB</u>					
Explorations	Dakota <u>5545</u>		Depth Casing Shoe					
	<u>5547-5710</u>							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12 1/4"</u>	<u>24# K55 8 5/8"</u>	<u>212.90 KB</u>	<u>150 sks. Cls B surfa</u>
<u>7 7/8"</u>	<u>17.0# J55 5 1/2"</u>	<u>5830'</u>	<u>400 sks. Cls B(544cf</u>
	<u>1 1/2</u>	<u>5555</u>	<u>200 sks. Cls B(320cf</u>

TEST DATA AND REQUEST FOR ALLOWABLE
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)

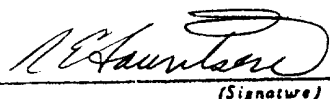
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Depth of Test	Tubing Pressure	Casing Pressure	Choke Size
			<u>1083</u>
Total Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
			<u>1.00</u>

AS WELL

Total Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
<u>846.864 MCF</u>	<u>3 hours</u>	<u>1</u>	<u>46.6</u>
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
<u>Back Pr.</u>	<u>1300 #</u>	<u>1300 #</u>	<u>3/4</u>

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.


(Signature)Operator
(Title)10-21-83
(Date)OIL CONSERVATION DIVISION
330-84
MAR 30 1984
APPROVED

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 deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

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

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

NEW MEXICO OIL CONSERVATION COMMISSION
MULTIPOINT AND ONE POINT BACK PRESSURE TEST FOR GAS WELL

Form C-122
Revised 9-1-65

Type Test <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Annual		Date 10-5-83	
Company Lobo Production Company		Connection	
Pool Basin Dakota		Formation Dakota	
Completion Date		Total Depth 5700'	Perforation 5505KB
Csg. Size 5 1/2"	Wt. d	Set At 5830	From 5712 To 5710
Tbg. Size 1 1/2"	Wt. d	Set At 5550	From To
Type Well - Single - Dradenoord - G.G. or G.O. Multiple		Proven Set At 1210	
Producing Thru		Reservoir Temp. °F R	Mean Annual Temp. °F R
L	H	G _g	% CO ₂
Prover		Meter Run	Taps
County San Juan		State New Mexico	
Pos. ck.			

FLOW DATA					TUBING DATA		CASING DATA		Duration of Flow
NO.	Prover Line Size	Orifice Size	Press. p.s.i.g.	Diff. in W	Temp. °F	Temp. °F	Press. p.s.i.g.	Temp. °F	
1.	2" x 3/4"					60			3 hours
2.									
3.									
4.									
5.									

RATE OF FLOW CALCULATIONS							
NO.	Coefficient (24 Hour)	$\sqrt{h_w P_m}$	Pressure P _m	Flow Temp. Factor F _t	Gravity Factor F _g	Super Compress. Factor F _{sp}	Rate of Flow O. Mcfd
1.	11.0		62	1.000	1.240	1.000	845.7
2.							
3.							
4.							
5.							

NO.	P _r	Temp. °R	T _r	Z	Gas Liquid Ratio Ratio	Mcf/bbl.
1.					A.P.L. Gravity or Liquid Hydrocarbons	Deg.
2.					Specific Gravity Gas	XXXXXXX
3.					Specific Gravity Flowing Fluid	XXXXXX
4.					Critical Pressure	P.S.I.A.
5.					Critical Temperature	R

P _c 1312	P _c ² 1721	3		
NO.	P _i ²	P _w	P _w ²	P _c ² - P _w ²
1		220	48.6	1672.7
2				
3				
4				
5				

(1) $\frac{P_c^2 - P_w^2}{P_c^2 - P_w^2} = 1.0291$	(2) $\left[\frac{P_c^2}{P_c^2 - P_w^2} \right]^n = 1.0217$
Area $\left[\frac{P_c^2 - P_w^2}{P_c^2 - P_w^2} \right]^n = 864.1$	

Absolute Open Flow 864.1	Angle of Slope 53.13	Slope, n .75
Remarks:		
Approved By Commission: _____ Conducted By: _____ Checked By: _____		

This form is not to
be used for reporting
packer leakage tests
in Southeast New Mexico

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Operator Lobo Production Company Lease Mesa Twin Mound "30" Well No. 1
Location _____
of Well: Unit D Sec. 30 Twp. 30N Rge. 14W County San Juan
Name of Reservoir or Pool (Oil or Gas) (Flow or Art. Lift) (Tbg. or Csg.)
Type of Prod. Method of Prod. Prod. Medium

Upper Completion	Gallup	oil	pump	2 1/16" tubing
Lower Completion	Dakota	gas	flow	1 1/2" tubing

PRE-FLOW SHUT-IN PRESSURE DATA

Upper Compl	Hour, date	09:00	Length of time shut-in	7 days	SI press. psig	500	Stabilized? (Yes or No)	yes
Lower Compl	Hour, date	9/29/83	Length of time shut-in	7 days	SI press. psig	1300	Stabilized? (Yes or No)	yes

FLOW TEST NO. 1

Commenced at (hour, date)* 09:35 10/6/83					Zone producing (Upper or Lower): Lower	
Time (hour, date)	Lapsed time since*	Pressure		Prod. Zone Temp.	Remarks	
		Upper Compl.	Lower Compl.			
09:50	0:15	500	272	60 °F	Flowing at slight	
10:05	0:30	500	220	60 °F	Mist throughout	
10:20	0:45	501	162	60 °F	Test	
10:35	1:00	502	124	60 °F		
11:35	2:00	502	68	60 °F		
12:35	3:00	502	50	60 °F		

Production rate during test

Oil: _____ BOPD based on _____ Bbls. in _____ Hrs. _____ Grav. _____ GOR _____
Gas: _____ MCFPD; Tested thru (Orifice or Meter): _____

MID-TEST SHUT-IN PRESSURE DATA

Upper Compl	Hour, date	09:00	Length of time shut-in	14 days	SI press. psig	621	Stabilized? (Yes or No)	Yes
Lower Compl	Hour, date	12:35	Length of time shut-in	7 days	SI press. psig	1148	Stabilized? (Yes or No)	Yes

FLOW TEST NO. 2

Commenced at (hour, date)** 09:00; 10-13-83					Zone producing (Upper or Lower): Upper	
Time (hour, date)	Lapsed time since **	Pressure		Prod. Zone Temp.	Remarks	
		Upper Compl.	Lower Compl.			
10/13 09:00	Shut-in	621	1148			
10/13 09:15	15 min.	30	1148			
10/14 09:00	24	30	1167			

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FEB 02 1984
OIL CON. DIV.
DIST. 3

Production rate during test

Oil: 90 BOPD based on _____ Bbls. in _____ Hrs. _____ Grav. _____ GOR _____
Gas: _____ MCFPD; Tested thru (Orifice or Meter): _____

REMARKS:

83 Test

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

Approved: _____
Oil Conservation Division

Original Signed by CHARLES GHOLSON

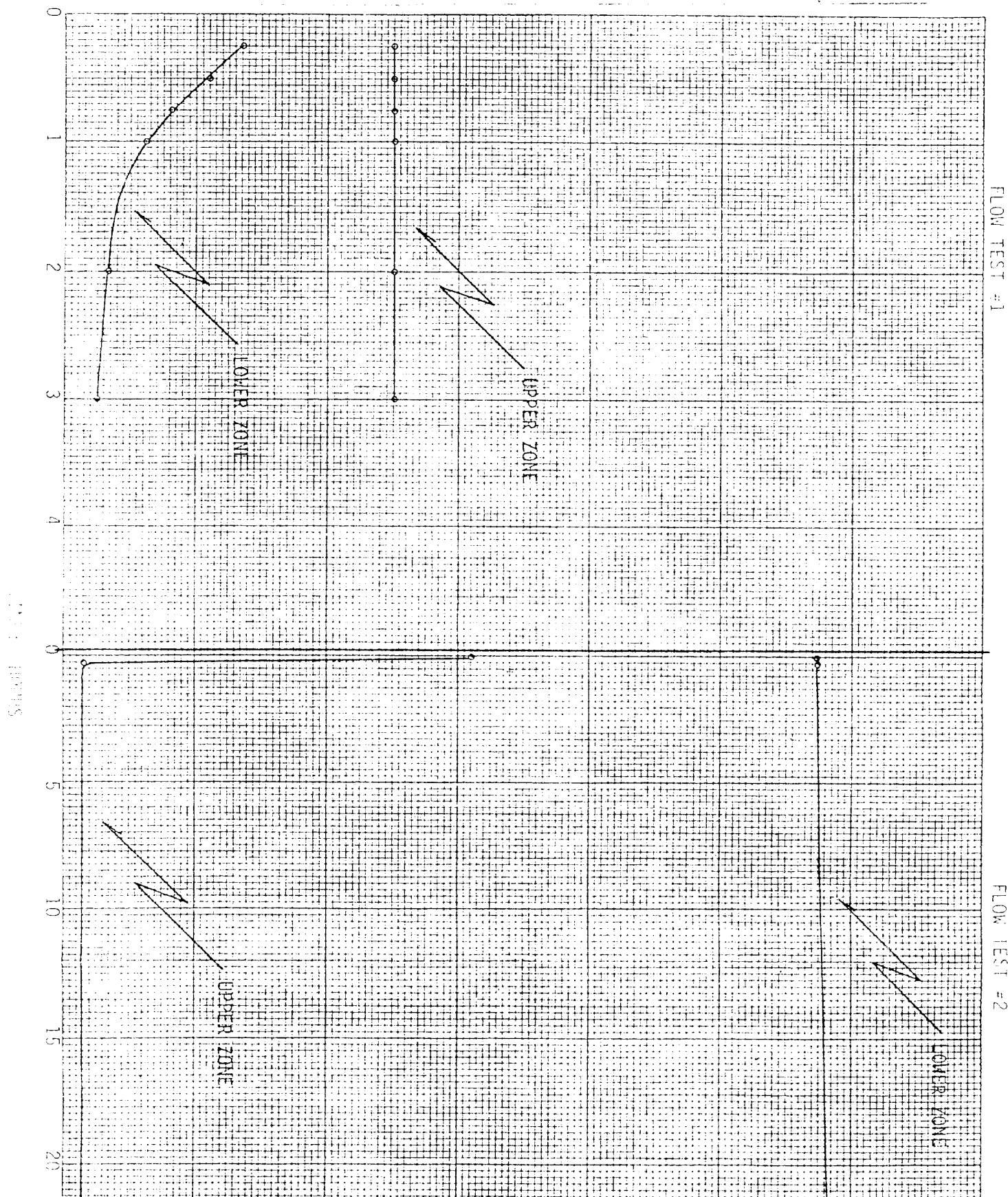
Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

Operator Charles Gholson

By _____

Title OperatorDate 2-1-84

1. A packer leakage test shall be commenced on each multiply completed well within seven days after actual completion of the well, and annually thereafter as prescribed by the order authorizing the multiple completion. Such tests shall also be commenced on all multiple completions within seven days following recompletion and/or chemical or fracture treatment, and whenever remedial work has been done on a well during which the packer at the tubing have been disturbed. Tests shall also be taken at any time that communication is suspected or when requested by the Commission.
2. At least 72 hours prior to the commencement of any packer leakage test, the operator shall notify the Commission in writing of the exact time the test is to be commenced. Offshore operators shall also be so notified.
3. The packer leakage test shall commence when both zones of the dual completion are shut-in for pressure stabilization. Both zones shall remain shut-in until the well-head pressure in each has stabilized, provided however, that they need not remain shut-in more than seven days.
4. For Flow Test No. 1, one zone of the dual completion shall be produced at the normal rate of production while the other zone remains shut-in.
5. A test shall be continued for seven days in the case of a gas well and for 74 hours in the case of an oil well. Note: If, on an initial packer leakage test, a gas well is being flowed to the atmosphere due to the lack of a pipeline connection the flow period shall be three hours.
6. Following completion of Flow Test No. 1, the well shall again be shut-in in accordance with Paragraph 3 above.
7. Flow Test No. 2 shall be conducted even though no leak was indicated during Flow Test No. 1. Procedure for Flow Test No. 2 is to be the same as for Flow Test No. 1 except that the previously produced zone shall remain shut-in while the zone which was previously shut-in is produced.
7. Pressures for gas-zone tests must be measured on each zone with a deadweight pressure gauge at intervals as follows: 3-hour tests: immediately prior to the beginning of each flow-period, at fifteen-minute intervals during the first hour thereof, and at hourly intervals thereafter, including one pressure measurement immediately prior to the conclusion of each flow period. 7-day tests: immediately prior to the beginning of each flow period, at least one time during each flow period (at approximately the midway point) and immediately prior to the conclusion of each flow period. Other pressures may be taken as desired, or may be requested on wells which have previously shown questionable test data.
- 74-hour oil zone tests: all pressures, throughout the entire test, shall be continuously measured and recorded with recording pressure gauges the accuracy of which must be checked at least twice, once at the beginning and once at the end of each test, with a deadweight pressure gauge. If a well is a gas-oil or an oil-gas dual completion, the recording gauge shall be required on the oil zone only, with deadweight pressure as required above being taken on the gas zone.
8. The results of the above-described tests shall be filed in triplicate within 15 days after completion of the test. Tests shall be filed with the Aztec District Office of the New Mexico Oil Conservation Commission or Northwest New Mexico Packer Leakage Test Form Revised 11-1-58, with all deadweight pressures indicated thereon as well as the flowing temperatures (gas zones only) and gravity and GOR (oil zones only). A pressure versus time curve for each zone of each test shall be constructed on the reverse side of the Packer Leakage Test form with all deadweight pressure points taken indicated thereon. For oil zones, the pressure curve should also indicate all key pressure changes which may be reflected by the recording gauge charts. These key pressure changes should also be tabulated on the front of the Packer Leakage Test form.



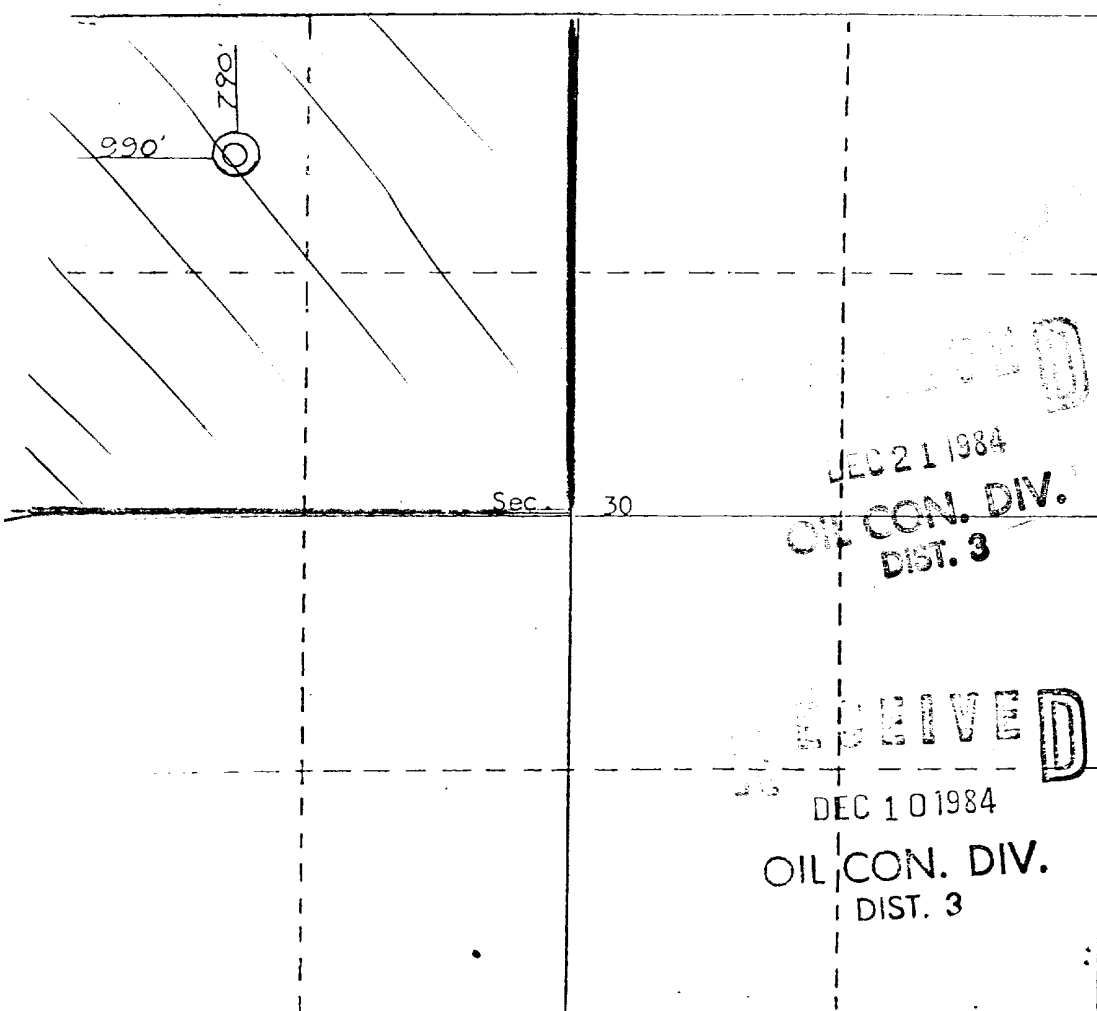
LOBO PRODUCTION			MESA TWIN MOUNDS		
Section	Township	Range	County		
30	30 NORTH	14 WEST	SAN JUAN		
790	feet from the NORTH	990	feet from the WEST		
Land Level Elev.	Producing Formation	Pool	Dedicated Acreage:		
5492	Gallup	Wildcat	160		

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization or forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.



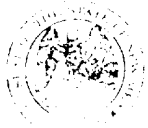
CERTIFICATION

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

Name
R.E. Lauritsen
Position
Partner
Company
Lobo Production
Date
June 3, 1983

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

5-11-1983
Date Surveyed
Curtis G. Stocking
Registered Professional Engineer
and/or Land Surveyor
Curtis G. Stocking
5980



STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION

TONY ANAYA
GOVERNOR

POST OFFICE BOX 2088
STATE LAND OFFICE BUILDING
SANTA FE, NEW MEXICO 87501
(505) 827-5800

July 31, 1984

Administrative Order No. DHC-485

Lobo Production
P.O. Box 2364
Farmington, NM 87499

Attention: R. E. Lauritsen, Partner

Re: Mesa Twin Mon. 30 #1
Unit B, Sec. T-30N,
R-14W, Basin Dakota and
Undesignated Gallup Pools,
San Juan County, NM

Gentlemen:

Reference is made to your recent application for an exception to Rule 303-A of the Division Rules and Regulations to permit the subject well to commingle the production from both pools in the wellbore.

It appearing that the subject well qualifies for approval for such exception pursuant to the provisions of Rule 303-C, and that reservoir damage or waste will not result from such downhole commingling, and correlative rights will not be violated thereby, you are hereby authorized to commingle the production as described above.

In accordance with the provisions of Rule 303.C.4., total commingled oil production from the subject well shall not exceed 30 barrels per day, and total water production from the well shall not exceed 60 barrels per day. The maximum amount of gas which may be produced daily from the well shall be determined by allowables established by the Oil Conservation Division prorationing schedules for these pools.

Assignment of allowable to the well and allocation of production from the well shall be on the following basis:

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OIL CON. DIV.
DIST. 4

Undesignated Gallup Pool: Oil 0 %, Gas 26 %
Basin Dakota Pool: Oil 100 %, Gas 74 %

Pursuant to Rule 303-C 5, the commingled authority granted by this order may be rescinded by the Division Director if, in his opinion, conservation is not being best served by such commingling.

Very truly yours,



JOE D. RAMEY,
Division Director