

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-105  
Effective 1-1-85

RECEIVED

MAY 23 1985

OIL CON. DIV. I  
DIST. 3

I.

Operator	WESTERN INTERNATIONAL PETROLEUM		
Address	P.O. Drawer 3307 - Farmington, New Mexico 87499		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Dry Gas <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Condensate <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>		

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Western Federal	1	Horseshoe Gallup	State, Federal or Fee	NM58917
Location	Unit Letter 0 : 2310' Feet From The East Line and 330' Feet From The South			
Line : Section	11	Township	30N	Range 16W, NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Giant Refining	P.O. Box 256-Farmington, NM 87499					
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)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	0	11	30N	16W	No	

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 Res'v.	Diff. Res'v.
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
03-16-85	04-28-85	2529'	2484'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
5425'GR 5431' KB	Gallup	2403'	2398'					
Perforations	2403' - 22', 2442' - 47', 2462' - 67'		Depth Casing Shoe					
				2529'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	9 5/8" - 36#	128'	152 cf (125sx)					
8 3/4"	7" - 20#	1710'	609 cf (459sx)					
6 1/4"	4 1/2" - 10.5#	1661 - 2529'	110 cf (100sx)					
	2 3/8" - 4.7# EUE	2398'	n.a.					

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.)	
04-28-85	05-11-85	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Core Size
24 hours	10 PSI	20 PSI	n.a.
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	17	23	9

GAS WELL

Actual Prod. Test-MCF/L	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back prod)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Core Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Mike Hicks  
(Signature)

Mike Hicks

Agent for Western Federal Petro

May 22nd, 1985

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 23 1985, 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 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