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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PERORATION OFFICE		

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-110
Effective 1-1-65

Operator Koch Exploration Company	
Address P.O. Box 2256, Wichita, Kansas 67201	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Incompletion <input type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead <input type="checkbox"/>
	Dry Gas <input type="checkbox"/>
	Condensate <input type="checkbox"/>
	Correction of Operator

If change of ownership give name and address of previous owner **KOCH INDUSTRIES INC. P.O. BOX, 2256, WICHITA, KANSAS 67201**

DESCRIPTION OF WELL AND LEASE	
Well Name Walker	Well No. 2-A
Pool Name, Including Formation Blanco/Mesa Verde	Kind of Lease State, Federal or Fee Federal
	Lease No. NM014110
Well Letter P , 1165 Feet From The South Line and 790 Feet From The East	
Line of Section 10 , 31N Range 10W , NMFM , San Juan County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc.	P.O. Box 108, Farmington, N.M. 87401
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Co.	P.O. Box 1492, El Paso, Texas 79978
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:

COMPLETION DATA	
Designate Type of Completion (W, X)	Oil Well Gas Well New Well Workover Deepen Plug Back Same Rest'v. Diff. Rest'v.
	X X X
Date Spudded 5-17-75	Date Compl. Ready to Prod. 6-27-75
Total Depth 5507'	P.B.T.D. 5472'
Elevation (DE, RKB, RT, GR, etc.) 6132' GR 6143' KB	Name of Producing Formation Mesa Verde
Top Oil/Gas Pay 4456'	Tubing Depth 5468'
Perforations	Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
15"	10-3/4"	210'	250
8-3/4"	7"	3499'	275
6-1/4"	4-1/2"	3306-5507'	275
	2-3/8"		

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of initial volume of load all and must be equal to or exceed top allowable for this depth or be for full depth)

Date First New Oil Run To Tanks	Date of Test	Producing Method
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

GAS WELL			
Actual Prod. Test-MCF/D 3300	Length of Test 24 hours	Bbls. Condensate/MMCF None	Gravity of Condensate ----
Testing method (pilot, back pr.) Open Flow	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 3/4"

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 19	
Vernon J. Lowe (Signature)		BY Original Signed by FRANK T. CHAVEZ	
Operations Manager (Title)		TITLE _____	
May 25, 1983 (Date)		This form is to be filed in compliance with RULE 110a.	
		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.	