

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator KOCH EXPLORATION COMPANY	Well API No. 30-045-27998
Address PO Box 2256, Wichita, KS 67201-2256	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gardner	Well No. 6-04	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease State, Federal	Lease No. NM-013642
Location Unit Letter B : 1170 1120 Feet From The north Line and 1820 Feet From The east Line Section 25 Township 32N Range 9W , NMPM , San Juan County				

III. 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)	
Northwest Pipeline	PO Box 59800, Salt Lake City, UT 84158-0900	
If well produces oil or liquids, give location of tanks. n/a	Unit Sec. Twp. Rge. 	Is gas actually connected? no When ? 10-15-92

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 <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 10-30-90	Date Compl. Ready to Prod. 4-29-91		Total Depth 3769'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 6872' GR	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 3369'		Tubing Depth 3329.36'			
Perforations OH 3369 - 3369					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8" csg	222'	110 sx C1B
8-3/4"	7" csg	3350'	590 sx
	2-3/8" tbg	3329.36'	

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


RECEIVED
OCT 09 1992
OIL CON. DIV
DIST. 3

GAS WELL

Actual Prod. Test - MCF/D shut-in	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 1420#	Casing Pressure (Shut-in) 1420#	Choke Size

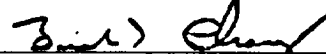
VI. OPERATOR CERTIFICATE OF COMPLIANCE

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
Randolph B. Whipple Prod. Admin. Coordinator
Printed Name
10-5-92 Title
316-832-5345
Date
 Telephone No.

OIL CONSERVATION DIVISION

Date Approved **OCT 28 1992**

By 
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.