

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
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Page 1

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Red Lake Oil Co.
Address
P.O. Box 742341, Houston, Texas 77274-2341
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)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name: Welch State
Well No.: 1
Pool Name, including Formation: Ind. E. Empire Yates Sev. Ribers
Kind of Lease: State, Federal or Fee State
Lease No.: B-1111
Location
Unit Letter: J : 1,750 Feet From The South Line and 1,650 Feet From The East
Line of Section: 28 Township: 17S Range: 28E, NMPM, EDDY County

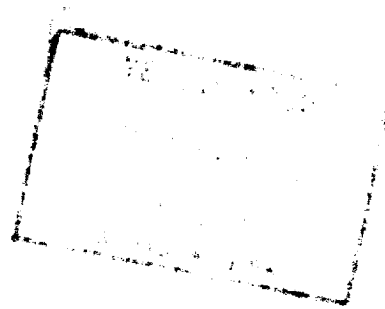
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Navajo Refining Co.
Address (Give address to which approved copy of this form is to be sent)
501 E. Main, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Address (Give address to which approved copy of this form is to be sent)
Post ID-2
3-13-87
camp + BH
If well produces oil or liquids, give location of tanks:
Unit: J Sec: 28 Twp: 17S Rge: 28E
Is gas actually connected? No When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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.
Dawn M. Noble
(Signature)
Vice President
(Title)
31 January 1987
(Date)

OIL CONSERVATION DIVISION
APPROVED FEB 6 1987
BY Original Signed By Mike Williams
TITLE Oil & Gas Inspector
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 deviating 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.



YB 100-100
100-100
100-100

V. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Some Res'v.	Diff. Res'v.
Date Spudded 12/30/86	Date Compl. Ready to Prod. 1/9/87	Total Depth 850 ft.			P.B.T.D. 828 ft.				
Elevations (DF, RKB, RT, GR, etc.) 3,684 GL	Name of Producing Formation Seven Rivers	Top Oil/Gas Pay 736 ft.			Tubing Depth 724 ft.				
Perforations 736 ft. to 757 ft. Seven Rivers						Depth Casing Shoe 828 ft.			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
7 7/8	5 1/2; 2 3/8	828;724	200 sacks class C

VI. 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)

Date First New Oil Run To Tanks 1/7/87	Date of Test 1/10/87	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure -0-	Casing Pressure -0-	Choke Size AOF
Actual Prod. During Test 21 barrels	Oil - Bbls. 20	Water - Bbls. 1	Gas - MCF -0-

GAS WELL

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