

JUN 11 1982

O. C. D.  
ARTESIA OFFICEREQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
PRODUCTION OFFICE	

Operator Cibola Energy Corporation	
Address P. O. Box 1668, Albuquerque, New Mexico 87103	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	

CASINGHEAD GAS MUST NOT BE  
PLACED AFTER 8/1/82  
UNLESS AN EXCEPTION TO R-4070  
IS OBTAINED.If change of ownership give name  
and address of previous ownerTHIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR  
NOTIFY THIS OFFICE

R-7114 (11-1-82)

## DESCRIPTION OF WELL AND LEASE

Lease Name Broke Tank	Well No. #1	Pool Name, including Formation Wildcat, Slaughter	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East Line of Section 7 Township 9S Range 30E , NMPM, Chaves, NM County				

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Artesia, NM 88210					
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 J	Sec. 7	Twp. 9S	Rge. 30E	Is gas actually connected? NO	When

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" 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 December 16, 198	Date Compl. Ready to Prod. May 18, 1982		Total Depth 3389'		P.B.T.D. 3367'			
Elevations (DF, RKB, RT, GR, etc.) 4019.5 Gr	Name of Producing Formation Slaughter		Top Oil/Gas Pay 3222'		Tubing Depth			
Perforations 3222-30', one shot per foot - four jumbo jets.					Depth Casing Shoe			

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE		DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	54.4#	260'	200 sx Class C cmt 2% CaCl
11"	8 5/8"	32# & 24#	2250'	200 sx Class C cmt 2% CaCl
	4 1/2"	10.5#	3389'	150 sx Class C cmt 2% CaCl

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)

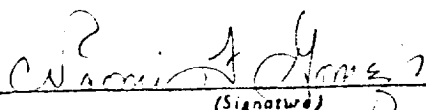
Date First New Oil Run To Tanks May 18, 1982	Date of Test May 29, 1982	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 36 barrels fluid	Oil-Bbls. 31 barrels ois	Water-Bbls. 5 barrels water	Gas-MCF

## 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

## 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.

Production Secretary  
(Title)June 9, 1982  
(Date)

## OIL CONSERVATION DIVISION

APPROVED JUN 29 1982, 19

BY Orig. Signed by  
Les Clements  
TITLE Oil & Gas Insp.

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 deviate 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 multiple completed wells.