

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Kaiser-Francis Oil Company	Well API No. 3D-D25-31249
Address P. O. Box 21468, Tulsa, OK 74121-1468	
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)	

I. DESCRIPTION OF WELL AND LEASE

Lease Name T.C.H. Ranch	Well No. 1-6	Pool Name, including Formation Hume - Atoka Gas	Kind of Lease State Federal or Fee	Lease No. LG-0030 & LG-8974
Location				
Unit Letter X : 660 Feet From The South Line and 660 Feet From The East Line				
Section 6 Township 16S Range 34E , NMPM Lea County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Enron Oil Trading & Transp.	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas Natural Gas PL of America	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?
	X 6 16S 34E No Yes WOPL 9-16-91
If this production is commingled with that from any other lease or pool, give commingling order number NSP-1039	

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 6/7/91	Date Compl. Ready to Prod. 8/1/91		Total Depth 12600			P.B.T.D. 12477		
Elevations (DF, RKB, RT, GR, etc.) 4152 Gr.	Name of Producing Formation Atoka		Top Oil/Gas Pay 12396			Tubing Depth 12309		
Perforations 12396-12422						Depth Casing Shoe 12600		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/4	425	450
11	8 5/8	4500	2000
7 7/8	5 1/2	12600	780

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

GAS WELL

Actual Prod. Test - MCF/D 414	Length of Test 4 hrs.	Bbls. Condensate/MMCF 12	Gravity of Condensate 56.1
Testing Method (pilot, back pr.) Orifice meter	Tubing Pressure (Shut-in) 2010	Casing Pressure (Shut-in) Pkr.	Choke Size 32/64

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.

C. Jan Valkenburg
Signature
Charlotte Van Valkenburg, Tech. Coordinator
Printed Name
8/29/91 **918-491-4314**
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved
By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR
Title

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.