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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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 Northwest Pipeline Corporation	
Address 501 Airport Drive, Farmington, New Mexico 87401	
Reason(s) for filing (check proper box)	Other (Please explain)
New Well ☐	Change In Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☒
Change In Ownership ☒	Casinghead Gas ☐ Condensate ☒

If change of ownership give name and address of previous owner El Paso Natural Gas Company, PO Box 990, Farmington, New Mexico 87401

I. DESCRIPTION OF WELL AND LEASE				
Lease Name Federal	Well No. 23	Pool Name, including Formation Cavalin Pictured Cliffs	Kind of Lease State, Federal or Fee	Lease No. NE 01471
Location				
Unit Letter B	990	Feet From The North	Line and 17 39.4	Feet From The East
Line of Section 6	Township 24N	Range 1W	NMPM	Rio Arriba County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil ☐ or Condensate ☒		Address (Give address to which approved copy of this form is to be sent)		
Northwest Pipeline Corporation		501 Airport Drive, Farmington, New Mexico 87401		
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒		Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company		Box 990, Farmington, New Mexico 87401		
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 6	Twp. 24N	Rge. 1W
Is gas actually connected?		When		

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

V. COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DE, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 Tanks	Date of Test	Producing Method (Pilot, Back pr., etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	

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

VI. 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 <u>FEB 7 1974</u> , 19	
ORIGINAL SIGNED BY <u>R. L. MANASSEY</u>		BY <u>Original Signed by A. R. Kendrick</u>	
(Signature)		TITLE <u>PETROLEUM ENGINEER DIST. NO. 3</u>	
OFFICE SUPERVISOR		This form is to be filed in compliance with RULE 1104.	
(Title)		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.	
(Date)		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.	