	0, 0, 0, 1, 2, 1, 5	1						
l	DISTRIBUTION		· ,					
Ì	ANTA FE	1 _	CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-116				
-	FILE	REQUEST	REQUEST FOR ALLOWABLE					
			AND	Effective 1-1-6\$				
ì	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (	GAS				
	LAND OFFICE							
- 1	TRANSPORTER OIL							
	GAS /			451 20 000 010/2				
	OPERATOR /			API 30-039-21963				
ı.	PRORATION OFFICE							
-	Operator							
El Paso Natural Gas Company								
Address								
Box 289, Farmington, New Mexico 87401								
	Reason(s) for filing (Check proper box)		Other (Please explain)					
	New Well X	Change in Transporter of:	Cinet (Fisher explain)					
			[					
	Recompletion	Oil Dry Go						
	Change in Ownership	Casinghead Gas Conder	nsate					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND	LEASE.   Well No.   Pool Name, including F	TVI-3-1: 3-2					
	Lease Name			arosos s				
	Canyon Largo Unit	286 Basin Dakota	Federo	SF078877				
	Location		1.0004					
	Unit Letter B; 110	OO Feet From The North Lin	ne and Feet From	The East				
	om zenei i							
	Line of Section 11 Tov	vnship 24-N Range	6-W NMPM Rio A	rriba County				
	Zinc or bestion							
	DESIGNATION OF TRANSPORT	TED OF OU AND NATI'RAL GA	ls.					
	Name of Authorized Transporter of Oil		Address (Give address to which appro	oved copy of this form is to be sent)				
	El Paso Natural Gas Company		Box 289, Farmington, New Mexico 87401					
	Name of Authorized Transporter of Cas	singhead Gas Or Dry Gas YY	Address (Give address to which approved copy of this form is to be sent)					
	1							
	El Paso Natural Gas Co			Box 289, Farmington, New Mexico 87401				
	If well produces cil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	nen				
	give location of tanks.	B 11 24-N 6-W						
	If this production is commingled wit	th that from any other lease or pool.	give commingling order number:					
	COMPLETION DATA	in that from any other series or poss,						
• • •		Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.				
	Designate Type of Completic	on - (X)	XX					
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	5-16-79	10-1-79	6727'	6709'				
		Name of Producing Formation	Top Sas Pay	Tubing Depth				
	Elevations (DF, RKB, RT, GR, etc.)		6410'	6584'				
	6435' GL	Dakota						
	Perforations 6410,6426,6498	,6509,6540,6547,6554,656	66,6578,6585' w/1 SPZ	Depth Casing Shoe				
				0/2/				
		TUBING, CASING, AND	D CEMENTING RECORD	SACKS CEMENT				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET					
	13 3/4"	9 5/8"	220	224 cf				
		7 7/8 § 8 3/4" 4 1/2 " 2 3/8"		369 cf tubing				
			6584'					
	L							
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total volume of load oil epth or be for full 24 hours)	l and must be equal to or exceed top allow				
	OIL WELL	ift etc.)						
	Date First New Oil Run To Tanks	Date of Test	Froducing Method (Frow, pump, gas to	Producing Method (Flow, pump, gas lift, etc.)				

	ľ			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF OC7	
GAS WELL			OIL CON 9 1979	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Congessate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) 1202	Casing Pressure (Shut-in) 1809	Choke Size	
	1202	1005		

## VI. CERTIFICATE OF COMPLIANCE

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.

J. G. Susco						
(Signature)						
Drilling Clerk						
(Title)						
10-1-79						
(Date)						

## OIL CONSERVATION COMMISSION

APPROVED	0CT-4	54	979	, 19	
BY <u>Origina</u>	1 Signed	by !	. R.	Kendrick	
TITLE	RUPE	RVISOR	OluZbiu	₹ <u>19</u> 5	

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 deviation 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. Canasata Forms C-104 must be filed for each nool in multiply