

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NAME OF OPERATOR	
LOCATION	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	
Operator	

El Paso Natural Gas Company

Address

Box 289, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Canyon Largo Unit	Well No. 295	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee	Lease No. SF 078883
Location Unit Letter <u>A</u> : <u>800</u> Feet From The <u>North</u> Line and <u>1000</u> Feet From The <u>East</u> Line of Section <u>4</u> Township <u>25N</u> Range <u>6W</u> , NMPM, <u>Rio Arriba</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 289, Farmington, New Mexico 87401				
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 289, Farmington, New Mexico 87401				
If well produces oil or liquids, give location of tanks.	Unit <u>A</u>	Sec. <u>4</u>	Twp. <u>25N</u>	Rge. <u>6W</u>	Is gas actually connected? ☐ 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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		☒	☒					
Date Spudded 8-5-80	Date Compl. Ready to Prod. 1-7-81	Total Depth 7476	P.B.T.D. 7459					
Elevations (DF, RKB, RT, GR, etc.) 61 30' GL	Name of Producing Formation Dakota	Top of Gas Pay 7155	Tubing Depth 7309					
Perforations 7155, 7163, 7180, 7238, 7244, 7250, 7266, 7276, 7282, 7314, 7320, 7326, 7332, 7346, 7349			Depth Casing Shoe 7476					
HOLE SIZE 13 3/4"	CASING & TUBING SIZE 9 5/8"	DEPTH SET 246'	SACKS CEMENT 224 cu. ft.					
8 3/4" & 7 7/8"	4 1/2"	7476 & 1416'	1428					
	2 3/8"	7309						

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 (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 916	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (Shut-in) 2344	Casing Pressure (Shut-in) 2307	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.

Drilling Clerk

January 26, 1981

OIL CONSERVATION DIVISION

FEB 3 1981

APPROVED _____, ID _____

Original Signed by FRANK J. CHAVEZ
DISTRICT 2

TITLE _____

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.

Generate Form C-104 must be filed for each pool in multiply