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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 El Paso Natural Gas Company	
Address PO Box 990, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of ownership give name and address of previous owner	

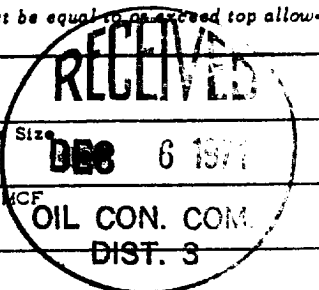
Lease Name Vaughn		Well No. 13	Pool Name, including Formation Basin Dakota	Kind of Lease State, (Federal) or Fee	Lease No. SF 079266
Location					
Unit Letter <u>A</u> ; <u>990</u> Feet From The <u>North</u> Line and <u>1190</u> Feet From The <u>East</u>					
Line of Section <u>27</u> Township <u>26N</u> Range <u>6W</u> , NMPM, <u>Rio Arriba</u> County					

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> El Paso Natural Gas Company		Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company		Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 27	Twp. 26N
		Rge. 6W	
Is gas actually connected?		When	

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

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 5-23-71	Date Compl. Ready to Prod. 11-24-71	Total Depth 7569'		P.B.T.D. 7549'					
Elevations (DF, RKB, RT, GR, etc.) 6670'GL	Name of Producing Formation Dakota	Top XX /Gas Pay 7218'		Tubing Depth 7501'					
Perforations 7218-24', 7236-44', 7324-32', 7368-741, 7395-7401', 7416-24', 7438-50', 7510-22'		Depth Casing Shoe 7569'							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
13 3/4"	9 5/8"	237'		190 sks.					
8 3/4" & 7 7/8"	4 1/2"	7569'		685 sks.					

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 (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 1219 MCF/D		Length of Test 3 hrs.	Bbls. Condensate/MMCF 44.17	Gravity of Condensate 44.39
Testing Method (pilot, back pr.) Calc. AOF		Tubing Pressure (shut-in) 1596		Casing Pressure (shut-in) 2224	Choke Size 3/4" variable	

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>DEC 6 1971</u> , 19	
Original Signed F. H. WOOD		BY <u>Original Signed by Emery C. Arnold</u>	
(Signature)		SUPERVISOR DIST. #3	
Petroleum Engineer		TITLE	
(Title)		This form is to be filed in compliance with RULE 1104.	
December 3, 1971		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.	