HO. OF COPIES RECEIVED			5	
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SANTA FE		7		
FILE		1	0	
U.\$.G.\$.		I	Ι	
LAND OFFICE				
IRANSPORTER	OIL	1		
	GAS	1		
OPERATOR		1		
PRORATION OFFICE				

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104 Supersedes Old C-104 and C-110

SANTAFE	REQUEST	FOR ALLOWABLE	Effective 1-1-65		
FILE	-	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
U.S.G.S.	_ AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL (	5A3		
OIL /	┥				
IRANSPORTER GAS /					
550547104 555165					
Operator Operator		<u>,</u>			
El Paso Natural Gas C	Company				
PO Box 990, Farming	ton, NM 87401				
Reason(s) for filing (Check proper bo		Other (Please explain)			
New Well	Change in Transporter of:	<u></u>			
Recompletion	OII Dry Gas	<b>7</b>			
Change in Ownership	Casinghead Gas Condens	sate			
If change of ownership give name and address of previous owner					
I. DESCRIPTION OF WELL AND	LEASE.	ormation Kind of Leas	Lease No.		
Lease Name	Well No. Pool Name Michael Fo	F			
Klein	21 Undesignated	Chacra G Stote, (Feder	51 077203		
1	1450 Feet From The North Line	e and <u>1600</u> Feet From	The West		
Line of Section 34 T	ownship 26N Range	6W , NMPM, Ric	Arriba County		
I. DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	S Address (Give address to which appro	oved copy of this form is to be sent)		
Name of Authorized Transporter of O El Paso Natural Gas		PO Box 990, Fa			
Name of Authorized Transporter of C	Company Casinghead Gas or Dry Gas X	Address (Give address to which appro			
El Paso Natural Gas		PO Box 990, Fa			
	Unit Sec. Twp. Rge.		nen		
If well produces oil or liquids, give location of tanks.	F 34 26N 6W	1			
If this production is commingled v	with that from any other lease or pool,	give commingling order number:			
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Rest		
Designate Type of Complet		X			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
6-25-73	10-19-73	3605'	3594'		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top 10:1/Gas Pay 3458'	Tubing Depth tubingless		
6396'GL	Chacra	3436	Depth Casing Shoe		
Perforations 3458-74' and 3562-72	2'		3605'		
	TUBING, CASING, AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
13 3/4"	9 5/8"	128'	160 cu. ft.		
8 3/4" & 6 3/4"	2 7/8"	3605'	286 cu.ft.		
	tubingless	<u> </u>			
		to an advantage of load of	l and must be equal to or exceed top allo		
V. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	alt sicile /		
		10	A Choke Sizes		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size 3		
Actual Prod. During Test	Oil-Bble.	Water-Bbis.	O Gan-MCFOM.		
Actual Prod. During 1991		\	100%		
			DIST. 3		
GAS WELL		1	Gravity of Condensate		
Actual Prod. Test-MCF/D 296	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensation		
Testing Method (pirot, back pr.) Calc. AOF	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 849	Choke Size 3/4"		
	tubingless				
VI. CERTIFICATE OF COMPLIA	INCE	OIL CONSERVATION COMMISSION			
	d completions of the Oil Consequation	APPROVED NOV 8	1973		
a tale base base complied	d regulations of the Oil Conservation d with and that the information given		W Hmery C. Arnold		
above is true and complete to	the best of my knowledge and belief.				
		TITLE SUPERVISOR DIS			
1. (1) L		This form is to be filed is	n compliance with RULE 1104.		
A. H. Bres	200	If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviation of the d			
			I that taken on the Well In accordance with notice		
Drilling Clerk		All sections of this form must be filled out completely for all-			

(Title)

(Date)

November 7, 1973

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.