HO. OF COMIFS RECEIVED		5	
DISTRIBUTION			
SANTA FE		1	
FILE		1	ب
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL	1	
INANSFORTER	GAS	1	L
OPERATOR		1	
PRORATION OFFICE			
Orierator			

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND 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		
1.	IRANSPORTER OIL / GAS / OPERATOR / PRORATION OFFICE Operator E) Paso Natural Gas Co	mpany				
	El Paso Natural Gas Company Address PO Box 990, Farmington, NM 87401					
	Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Gas Casinghead Gas Condens	7			
	If change of ownership give name and address of previous owner			-		
II.	DESCRIPTION OF WELL AND L Lease Name Canyon Largo Unit	208 Ballard Picture	ed Cliffs State, (*ederal)	or Fee SF 078875		
	Unit Letter G: 1820	Feet From The	and Feet From Th	Rio Arriba		
	Ellie of Section	nship Marige		County County		
11.	Name of Authorized Transporter of Cil El Paso Natural Gas C Name of Authorized Transporter of Cast	Gas Company PO Box 990, Farmington, Nivi 67401 Iter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent)				
	El Paso Natural Gas C	ompany Unit Sec. Twp. P.ge.	PO Box 990, Far	emington, NM 87401		
	If well produces oil or liquids, give location of tanks. If this production is commingled with	G 29 25N 6W	vive commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completion	n - (X) XX Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.		
	Date Spudded 9-19-73	10-30-73	2768'	2757'		
	Elevations (DF, RKB, RT, GR, etc.) 6751'GL	Name of Producing Formation Pictured Cliffs	Top Xil/Gas Pay 2640'	Tubing Depth tubingless Depth Casing Shoe		
	Perforations 2640-52', 2659-71', a	659-71', and 2692-2704'		2768'		
		TUBING, CASING, AND		SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE 8 5/8"	130'	106 cu. ft.		
	12 1/4"	2 7/8''	2768'	242 cu. ft.		
	7 7/8" & 6 3/4"	tubingless				
v	TEST DATA AND REQUEST FO	TA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed able for this depth or be for full 24 hours)				
·	OIL WELL Date First New Oil Run To Tanks	Date of Test		CENTD/		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size73		
	Actual Prod. During Test	Oil-Bble.	Water-Bbls.	Gas-MCFCOM.		
	OIU CONT. 3					
	GAS WELL		2005	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test 3 hrs.	Bbis. Condensate/MMCF			
	2236 Testing Method (pitot, back pr.) Calc. AOF	Tubing Pressure (shut-in) tubingless	Casing Pressure (Shut-in) 595	Choke Size 3/4"		
VI	CERTIFICATE OF COMPLIAN	COMPLIANCE OIL CONSERVATION COMMISSION				
		regulations of the Oil Conservation with and that the information given	APPROVED NOV 9 19			
	above is true and complete to the	e best of my knowledge and belief.	BY Original Signed by I	#3		
				compliance with RULE 1104.		
	1 9. Busses (Signature)		If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation well, this form must be accompanied by a tabulation of the deviation			
			well, this form must be accompa-	dance with RULE 111.		
	Drilling Clerk	Drilling Clerk		st be filled out completely for allow-		
	November 9, 1973		able 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 conditions.			
	. P.		If Mall Italia or Bampail or Coursellar			

(Date)

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 flied for each pool in multiply completed wells.