DISTRIBUTION SANTA FE /	REQUE	L CONSERVATION COMMISSION ST FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65
J.S.G.S. LAND OFFICE TRANSPORTER GAS / OPERATOR / PHORATION OFFICE Operator	AUTHORIZATION TO T	RANSPORT OIL AND NATURAL	_ GAS
El Paso Natural Gas Address P. O. Box 990, Farm Reason(s) for filing (Check prope New Well Recompletion	Change in Transporter of:	Other (Please explain) Gas	
Change in Ownership		densate	
and address of previous owner			
Lease Name	ND LEASE Well No. Pool Name, Including	Formation Kind of Lea	S.C.
Canyon largo Unit	272 Ballard PC	State(Fede	Lease No.
Unit Letter L	1580 Feet From The S	ine and 990 Feet From	The W
Line of Section 33	Township 25N Range	6W , NMPM, Rio A	Arriba County
Name of Authorized Transporter of El Paso Natural Gas	Company	Address (Give address to which appropriate P. O. Box 990, Farming	oved copy of this form is to be sent) gton, NM 87401
Name of Authorized Transporter of Casingheda Gas or Dry Gas X El Paso Natural Gas Company		Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Ege.		hen
If this production is committeed COMPLETION DATA	with that from any other lease or pool	l, give commingling order number:	
Designate Type of Compl	A	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Date Spudded 03-11-75	Date Compl. Ready to Prod. 08-08-75	Total Depth 2300 *	P.B.T.D. 2290'
Elevations (DF, RKB, RT, GK, etc. 6436 GL	Name of Producing Formation Pictured Cliffs	Top X:1/Gas Pay 2184	Tubing Depth Tubingless
Perforations 2184', 2189', 2194',	, 2210', 2250', 2255', 226	50'	Depth Casing Shoe 2300'
HOLE SIZE		ID CEMENTING RECORD	
12 1/4"	CASING & TUBING SIZE	138'	SACKS CEMENT
7 7/8" and 6 3/4"	2 7/8" Tubingless	2300'	118 cu. ft. 335 cu. ft.
TEST DATA AND REQUEST			
OH RELL		epth or be for full 24 hours;	
Date First New Cil Run To Tonks	Date of Test	Producing Method (Flow, pump, gas li	
Length of Test	Tubing Pressure	Casing Pressure	Cheryers By Own.
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	CONTRACT OF THE PROPERTY OF TH
GAS WELL			11 013
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2522 Testing Method (pitot, back pr.)	3 hours Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Calc. A.O.F.	```	580	3/4"
CERTIFICATE OF COMPLIA I hereby certify that the rules an	d regulations of the Oil Conservation	APPROVED	AUG 25 1975
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Original Signed by A. R. Kendrick PETROLEUM ENGINEER DIST. NO. 3	

III.

IV.

V.

(Signature)

(Title)

(Date)

Drilling Clerk

August 14, 1975

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.