	6	,
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OIL	1	
GAS	7	
	2	
	OIL	OIL /

110

FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS	REQUEST	CONSERVATION COMMISSION T FOR ALLOWABLE AND RANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65 GAS	
OPERATOR 2 PRORATION OFFICE Operator Union Oil (Company of California	· · · · · · · · · · · · · · · · · · ·		
Address P. O. Box 2	2620, Casper, Wyoming	82602		
Reason(s) for filing (Check proper be	px)	Other (Please explain)		
New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry G Casinghead Gas Conde	Gas X		
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND				
Nava jo 2 19	Basin Dako		NOO-12-174-	
Unit Letter L : 180		ne and 790 Feet From	The West	
Line of Section 19 T	ownship 25 North Range	10 West , NMPM, San	Juan County	
I. DESIGNATION OF T. \NSPOI	RTER OF OIL AND NATURAL GA			
Plateau. Inc.		Address (Give address to which appropriate P.O. Box 108, Farming	ton, N.M. 87401	
Name of Authorized Transporter of C Northwest Pipeline C		Address (Give address to which approved copy of this form is to be sent) P.O. Box 1526, Salt Lake City, Utah 84110		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. L 19 25N 10W	Is gas actually connected? Wh		
If this production is commingled w COMPLETION DATA	ith that from any other lease or pool,	give commingling order number:	None	
Designate Type of Complete	, A	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
9-25-78	Date Compl. Ready to Prod. 10-17-78	Total Depth 6125	P.B.T.D. 6090 °	
Elevations (DF, RKB, RT, GR, etc.) 6563 GR	Name of Froducting Formation	Top Oil/Gas Pay 5960-6030'	Tubing Depth 5842	
Perforations 1 SPF 5965', 5	991', 6002', 6005', 6009	6026' ', 6013', 6016', 6021'	Depth Casing Shoe 6124	
HOLE SIZE	TUBING, CASING, AND	D CEMENTING RECORD		
12 - 1/4"	8 - 5/8"	743 °	SACKS CEMENT 500	
7 - 7/8"	5 - 1/2"	6124'	850	
	2 - 3/8"	5842		
7. TEST DATA AND REQUEST FOIL WELL		Ifter recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to or exceed top allow-	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	t, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Sf2	
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	God-MCF	
GAS WELL			(giv. oz. 0)	
Actual Prod. Test-MCF/D 800	Length of Test 24 hours	Bbls. Condensate/MMCF	Gravity of Condenate	
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1800 psi	Casing Pressure (Shut-in)	Choke Size 20/64"	
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.		APPROVEDAPR 0 979		
		By Original Signed by A. R. Kendrick		
		TITLE SUPERVISOR DI	ST. #3	
This form is to be filed in compliance with RULE If this is a request for allowable for a newly drille Well, this form must be accompanied by a tabulation of		able for a newly drilled or deepened		
District Operations	Manager	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 allow-		
March 30, 1979	tie)	able on new and recompleted we		

I name or number, or transporter, or other such change of condition.