## DISTRIC SANTA FE FILE U.S.G.S. LAND OFFI IRANSPORT DISTRIBUTION LAND OFFICE TRANSPORTER OPERATOR

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C+104
Supersedes Old C-104 and C-110
Effective 1-1-65

AND	
AUTHORIZATION TO TRANSPORT OIL AND NATURAL	GAS

PRORATION OFFICE							
Operator National Con-	n Campania						
Address   Calcal Gas Company							
Box 990, Frimmington Reason(s) for Hung (Check proper bo	n. New Mexico 87401	Other (Pleas	e explain)				
New Well Change in Transporter of:							
Recompletion	OII Dr	y Gas 🔀					
Change in Ownership	Casinghead Gas Ca	ondensate		<del> </del>			
If change of ownership give name and address of previous owner							
DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including	ng Formullon	Kind of Lease		Lease No.		
San Juan 27-4 Unit		nco Mesa Verde state, F			sF 080670		
Location	05 North	1521		East			
•	05 Feet From The North	Line and	Feet From 1	The	Arriba		
Line of Section 29 To	ownship 27N Range	TW , NMP	м,		County		
DESIGNATION OF TRANSPOR		GAS Address (Give address	to which approx	ved copy of this fo	rm is to be sent)		
El Paso Natural Gas		Box 990, Farm	Box 990, Farmington, New Mexico 87401				
Name of Authorized Transporter of Co	or Dry Gas X	Address if ive address					
Northwest Pipeline					w Mexico 87401		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. G 29 27N 4.		Is gas actually connected? When				
If this production is commingled w COMPLETION DATA		ool, give commingling orde	er number:				
Designate Type of Completi	ion - (X)   Oil Well   Gas Well	II New Well Workover	Deepen	Plug Back San	ne Restv. Diff. Restv.		
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	·		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Top Oil/Gas Pay Tubing Depth				
Perforations				Depth Casing Sh	.08		
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH S		SACKS	S CEMENT		
<u>, , , , , , , , , , , , , , , , , , , </u>				<del> </del>			
TEST DATA AND REQUEST FOR ALLOWABLE (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 Cil Run To Tanks	Date of Teat	Producing Method (Flo	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-Met			
				DEC	4 62		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	 DF	Grevity of Conde			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in)	Choke DIS			
			CONSERVA	TION COMMI	NOISS		
CERTIFICATE OF COMPLIAN		OIL CONSERVATION COMMISSION FEB 7 1974					
I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.		en Origins	Original Signed by A. R. Kendrick				
		TITLE	PETROLEUM ENGINEET DIST NO 3				
	11	This form is to be filed in compliance with RULE 1104.					
	76 45 40 40 40 40	The language for allowable for a newly drilled or deepened					
Danta (Sign	tests taken on the	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 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 condition well name or number.					change of condition.		
10	•	- II	-2 C-104 miles	to find for me	ach and in multiply		