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LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	/
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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

Operator El Paso Natural Gas Company	
Address PO Box 990, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 27-4 Unit	Well No. 16(OWWO)	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or (Fee)	Lease No. Fee
Location Unit Letter <u>M</u> ; <u>990</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>West</u>				
Line of Section <u>17</u> Township <u>27N</u> Range <u>4W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM	
If well produces oil or liquids, give location of tanks.	Unit <u>M</u>	Sec. <u>17</u>
	Twp. <u>27N</u>	Rge. <u>4W</u>
Is gas actually connected?		When

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		X		X		X		X
Date Spudded w/o 10-6-73	Date Compl. Ready to Prod. w/o 11-21-73		Total Depth 8016'		P.B.T.D. 6958'			
Elevations (DF, RKB, RT, GR, etc., 6672'GL	Name of Producing Formation Mesa Verde		Top <input checked="" type="checkbox"/> Gas Pay 5232'		Tubing Depth 5998'			
Perforations 5232-40', 5292-5300', 5314-22', 5348-56', 5366-80', 5712-28', 5742-50, 5764-72', 5782-98', 5812-20', 5832-40', 5856-64', 5922-38', 5956-66'.					Depth Casing Shoe 8016'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	13 3/8"		210'		200 sks.			
12 1/4"	9 5/8"		3725'		1000 sks.			
8 3/4"	5 1/2"		7874'		1200 sks.			
4"liner/ 2 3/8" tubing 7780-7990'/					5998' tubing, 100 sk. on liner			

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

Date First New Oil Run To Tanks	Date of Test	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-MCF

GAS WELL

Actual Prod. Test-MCF/D 5728 MCF/D	Length of Test 3 hrs.	Bbls. Condensate/MCF 14	Gravity of Condensate 56
Testing Method (pitot, back pr.) Calc. AOF	Tubing Pressure (shut-in) 721	Casing Pressure (shut-in) 1177	Choke Size 4" M.R.

VI. CERTIFICATE OF COMPLIANCE

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.

Drilling Clerk

December 6, 1973

OIL CONSERVATION COMMISSION

APPROVED

BY Original Signed by Emery C. Arnold

TITLE

SUPERVISOR DIST. #5

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 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.

Separate Forms C-104 must be filed for each pool in multiply
completed wells.