

District I  
PO Box 1980, Hobbs, NM 88241-1980

District II  
P O Drawer DD, Artesia, NM 88211-0719

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals, & Natural Resources Department

Form C-104  
Revised February 21, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator Name and Address Burlington Resources Oil & Gas PO Box 4289 Farmington, NM 87499		<sup>2</sup> OGRID Number 14538
		<sup>3</sup> Reason for Filing Code CO - 7/11/96
<sup>4</sup> API Number 30-039-20046	<sup>5</sup> Pool Name Basin DAKOTA	<sup>6</sup> Pool Code 68-71599
<sup>7</sup> Property Code 007454	<sup>8</sup> Property Name SAN JUAN 27-5 UNIT	<sup>9</sup> Well Number #108

II. <sup>10</sup> Surface Location

<sup>11</sup> U/I or lot no. I	<sup>12</sup> Section 15	<sup>13</sup> Township 027N	<sup>14</sup> Range 005W	<sup>15</sup> Lot.Idn	<sup>16</sup> Feet from the 1460	<sup>17</sup> North/South Line S	<sup>18</sup> Feet from the 1150	<sup>19</sup> East/West Line E	<sup>20</sup> County RIO ARriba
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<sup>11</sup> Bottom Hole Location

<sup>21</sup> U/I or lot no.	<sup>22</sup> Section	<sup>23</sup> Township	<sup>24</sup> Range	<sup>25</sup> Lot.Idn	<sup>26</sup> Feet from the	<sup>27</sup> North/South Line	<sup>28</sup> Feet from the	<sup>29</sup> East/West Line	<sup>30</sup> County
<sup>31</sup> Lse Code	<sup>32</sup> Producing Method Code	<sup>33</sup> Gas Connection Date	<sup>34</sup> C-129 Permit Number	<sup>35</sup> C-129 Effective Date	<sup>36</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>37</sup> Transporter OGRID	<sup>38</sup> Transporter Name and Address	<sup>39</sup> POD	<sup>40</sup> O/G	<sup>41</sup> POD ULSTR Location and Description

IV. Produced Water

<sup>42</sup> POD	<sup>43</sup> POD ULSTR Location and Description
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V. Well Completion Data

<sup>44</sup> Spud Date	<sup>45</sup> Ready Date	<sup>46</sup> TD	<sup>47</sup> PBTD	<sup>48</sup> Perforations
<sup>49</sup> Hole Size	<sup>50</sup> Casing & Tubing Size	<sup>51</sup> Depth Set	<sup>52</sup> Sacks Cement	

VI. Well Test Data

<sup>53</sup> Date New Oil	<sup>54</sup> Gas Delivery Date	<sup>55</sup> Test Date	<sup>56</sup> Test Length	<sup>57</sup> Tbg. Pressure	<sup>58</sup> Csg. Pressure
<sup>59</sup> Choke Size	<sup>60</sup> Oil	<sup>61</sup> Water	<sup>62</sup> Gas	<sup>63</sup> AOF	<sup>64</sup> Test Method

<sup>65</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Dolores Diaz*

Printed Name:  
Dolores Diaz

Title:  
Production Associate

Date:  
7/11/96

Phone  
(505) 326-9700

OIL CONSERVATION DIVISION

Approved by: Frank T. Chavez

Title: District Supervisor

Approved Date: July 11, 1996

<sup>66</sup> If this is a change of operator fill in the OGRID number and name of the previous operator  
14538 Meridian Oil Production

Previous Operator Signature

Printed Name

Title

Date

Signature: *Dolores Diaz*

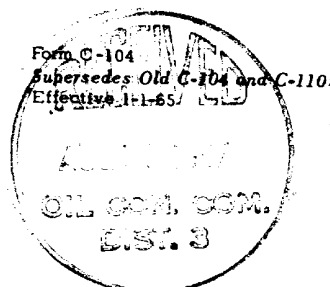
Dolores Diaz

Production Associate

7/11/96

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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



I. Operator  
**El Paso Natural Gas Company**  
Address  
**Box 990, Farmington, New Mexico**  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>San Juan 27-5 Unit</b>	Well No. <b>108</b>	Pool Name, Including Formation <b>Basin Dakota</b>	Kind of Lease State, Federal or <input checked="" type="checkbox"/> Private	Lease No.
Location Unit Letter <b>I</b> ; <b>1460</b> Feet From The <b>South</b> Line and <b>1150</b> Feet From The <b>East</b> Line of Section <b>15</b> Township <b>27N</b> Range <b>5W</b> , NMPM, <b>Rio Arriba</b> 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"/> <b>El Paso Natural Gas Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 990, Farmington, New Mexico</b>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <b>El Paso Natural Gas Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 990, Farmington, New Mexico</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>I</b>	Sec. <b>15</b>
	Twp. <b>27N</b>	Rge. <b>5W</b>
	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'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded <b>7-1-67</b>	Date Compl. Ready to Prod. <b>8-16-67</b>		Total Depth <b>7880'</b>		P.B.T.D. <b>7848'</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>6618' GL</b>	Name of Producing Formation <b>Dakota</b>		Top <del>xxx</del> Gas Pay <b>7612'</b>		Tubing Depth <b>7584'</b>			
Perforations <b>7612-32, 7730-50, 7784-94, 7808-28</b>					Depth Casing Shoe <b>7880'</b>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>13 3/4"</b>	<b>9 5/8"</b>		<b>337'</b>		<b>200 Sks.</b>			
<b>7 7/8"</b>	<b>4 1/2"</b>		<b>7880'</b>		<b>670 Sks.</b>			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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 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 <b>6457 MCF/D</b>	Length of Test <b>3 Hours</b>	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) <b>Calculated A.O.F.</b>	Tubing Pressure (shut-in) <b>2504</b>	Casing Pressure (shut-in) <b>2099</b>	Choke Size <b>3/4"</b>

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.

Original signed by  
**Carl E. Matthews**

(Signature)

**Petroleum Engineer**

(Title)

**August 25, 1967**

(Date)

OIL CONSERVATION COMMISSION

**AUG 29 1967**

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

By **Original Signed by Emery C. Arnold**

**SUPERVISOR DIST. #3**

TITLE \_\_\_\_\_

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.

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