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SANTA FE	1			
FILE		1	-	
U.S.G.S.	l —			
LAND OFFICE				
TRANSPORTER	OIL	/		
	GAS			
OPERATOR		2		
BRODATION OF	1			

## NEW MEXICO OIL CONSERVATION COMMISSION

	SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-116 Effective 1-1-65		
	U.S.G.S.		AND INSPORT OIL AND NATURAL			
	LAND OFFICE	AUTHORIZATION TO TRA	MISFORT OIL AND NATURAL	GA3		
	TRANSPORTER GAS /					
	OPERATOR 2					
I.	PRORATION OFFICE Operator	<u> </u>				
	El Paso Natural Gas Company					
	Box 990, Farmington,	New Mexico - 87401				
	Reason(s) for filing (Check proper box	x)	Other (Please explain)			
	New Well Recompletion	Change in Transporter of: O:1 Dry Gas	s			
	Change in Ownership	Casinghead Gas Conden	<b>=</b> 1			
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AND	LEASE.   Well No.   Pool Name, Including Fo	ormation Kind of Leas	se Lease No.		
	al cr Fee SF 080673					
	Unit Letter K ; 150	Feet From The South Line	e and 1550† Feet From	The West		
	Line of Section 8 To	ownship <b>27N</b> Range	8 4 , NMPM, Ri	O Arriba County		
HI.	DESIGNATION OF TRANSPOR	or Condensate	AS Address (Give address to which appro	and cany of this form is to be sent		
	El Paso Natural Gas	Company				
	Name of Authorized Transporter of Co	rsinghead Gas or Dry Gas χ	Box 990, Farmington, Address (Give address to which appro			
	El Paso Natural Gas	Company Unit Sec. Twp. Ege.	Box 990, Farmington,  ¡ Is gas actually connected? Wh	New Maxico - 87401		
	If well produces oil or liquids, give location of tanks.	K 8 27N 4W				
IV	If this production is commingled w. COMPLETION DATA	ith that from any other lease or pool,	give commingling order number:			
17.		Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff, Resty,		
	Designate Type of Completi	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded 8-13-68	9-10-68	8000 t	70761		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Gas Pay	Tubing Depth		
	6711' GL Perforations	Dakota	7794	7765 Depth Casing Shoe		
	7794-7804, 7814-24, 7884-94, 7912-24, 7966-78, 7990-96					
		TUBING, CASING, AND	CEMENTING RECORD			
	13 3/4"	9 5/8"	DEPTH SET	SACKS CEMENT		
	8 3/4"	7"	3779'	145 Sks.		
	6 1/4"	4 1/2"	80001	400 Sks		
		2 3/8"	7765 '	Tubing		
٧.	TEST DATA AND REQUEST FOIL WELL	able for this de	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 Tes:	Producing Method (Flow, pump gas)	Tir and		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF.		
			7 0	3		
	GAS WELL  OIL DIST.  ONL DIST.  Any Start Tool MCED. I engined Test					
	Actual Prod. Test-MCF/D	Length of Test  3 Hours	Bbls. Condensate/MMCF	Cravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	Calculated A.O.F.	<b>260</b> 8	2563	3/4"		
VI.	CERTIFICATE OF COMPLIAN	ICE	OIL CONSERV	ATION 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.  Original signed by Corl E. Matthews		I So Oliginar bigited by minery of the services			
			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			
	, -	nature)	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,			
	Petroleum Engineer	Title)				
	September 16, 1968					
		Date)	well name or number, or transporter, or other such change of condition.  Separate Forms C-104 must be filed for each pool in multiply			
į.			completed wells.			