NO. OF COPIES RECEIVED	6				
DISTRIBUTION	*	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-			
SANTA FE	7				
FILE	110	KEGOLUI	AND		Effective 1-1-65
u.s.g.s.	ALITH	DEZATION TO TR	ANSPORT OIL AND	NATURAL GAS	
LAND OFFICE		SKIZATION TO TK	AND ON OIL 71115		
OIL	7				/ Sec. 18
TRANSPORTER GAS	; 				
1	2				000 00 1000
SOCRATION OFFICE					DEC 23 1968
Operator					Oll CON TEN
Ki Paso Natura	Gas Commeny				OIL CON. COM.
Address					DIST, 3
Box 990, Farmir	oton. New Mex	ico - 87401			
Reason(s) for filing (Check pro	oper box)		Other (Pleas	e explain)	
New We!l		n Transporter of:			
Recompletion	Oil	Dry G	las		
Change in Ownership	Casinghe	ead Gas Conde	ensate		
Change in Ownership					
If change of ownership give and address of previous own	er				
II. DESCRIPTION OF WELI	AND LEASE	Pool Name, Including	Formation	Kind of Lease	Lease No.
Lease Name	}			State, Faderal or Fe	•• ar 080669
San Juan 27-4 Uni	t 50	Basin Dako	ota		
Location Unit Letter K	1500 Feet Fr	om The South	ine and	Feet From The	West
Line of Section 19	Township 2	7N Range	NMP	M, Rio Arri	ba County
Effic of Section 23					
II. DESIGNATION OF TRAN	SPORTER OF OIL	. AND NATURAL G	AS		
Name of Authorized Transport	er of Oil or (Condensate 🔣	Address (Give address	to which approved co	py of this form is to be sent)
El Paso Natural Gas Company					Mexico - 87401
Name of Authorized Transport	er of Casinghead Gas	or Dry Gas 🌋	Address (Give address	to which approved co	py of this form is to be sent)
El Paso Natural G	is Company		Box 990, Far	mington, New	Mexico - 87401
	Unit Se	1	Is gas actually connec	oted? When	
If well produces oil or liquids give location of tanks.	K 1	9 27N 4W			
If this production is commir			give commingling ord	er number:	
If this production is commit IV. COMPLETION DATA	gred with that from a	my other rease or poor	die Principalities		
		Oil Well Gas Well	New Well Workover	Deepen Plu	g Back Same Restv. Diff. Res
Designate Type of Co	mpletion = (X)	X	X		1
Date Spudded	Date Compl.	Ready to Prod.	Total Depth	P.F	B.T.D.
10-17-68	12-	17-68	7910'		7910'
Elevations (DF, RKB, RT, G	R. etc.) Name of Pro	Name of Producing Formation Top To/Gas Pay		Tuh	oing Depth
6642' GL	1	kota	7688		7682
Perforations				Dey	oth Casing Shoe
	7871-26, 7869	-68, 7890-7900			7910'
[000=94] [[04=20]	1021-201 1000	TURING CASING A	ND CEMENTING RECO	RD	
		G & TUBING SIZE	DEPTH	l l	SACKS CEMENT
HOLE SIZE	9 5/	AH	2291		238
13 3/4"		<u> </u>	3723'		135 Sks.
0 3/4"	X" 7"	L/2"	7910'		1410 Sks.
6 1/4"		3/8"	76821		
	2				was he agual so as assaud son all
V. TEST DATA AND REQU	JEST FOR ALLOW	ABLE (Test must be	e after recovery of total vo depth or be for full 24 how	nume of load oil and m urs)	nust be equal to or exceed top all
OIL WELL		able joi titta	Producing Method (FI	low, pump, gas lift, etc	:.)
Date First New Oil Run To T	duks Date of Les	•			
			Casing Pressure	Ch	oke Size
Length of Test	Tubing Pres	sure	Oramid Liasoma		
			Water - Bbls.	Ge	s-MCF
Actual Prod. During Test	Oil-Bbls.		11.7/01 - DD101	•	

Date First New Oil Run To Tanks	Date of Test Producing Method (Flow, pump, gas lift, etc.)		mp, gas tift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF

GAS WELL Gravity of Condensate
59.4 API Length of Test Bbls. Condensate/MMCF Actual Prod. Test-MCF/D 3 Hours 17.90 Bbls-3 Hrs. 5804 Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) 3/4" 2439 2457 Calculated A.O.F.

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 F. H. WOOD

this are cisated and a second					
(Sign	ature)				
Petroleum Engineer					
(T	itle)				
December 20, 1968					

(Date)

OIL CONSERVATION COMMISSION

DEC 2,3 1968 APPROVED_ 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.