NO. OF COPIES RECEIVED		6	
DISTRIBUTION			
SANTA FE			
FILE			_
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	/	
	GAS	/_	
OPERATOR		2	
		7 -	

ſ	DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104		
- 1	SANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
Γ	FILE		AND			
	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL G	SAS .		
	LAND OFFICE					
	TRANSPORTER OIL /					
	GAS /					
	OPERATOR					
1.	PRORATION OFFICE Operator					
-	El Paso Natural Gas	Company				
ŀ	Address					
	Box 990, Farmington	n, New Mexico 87401	Other (Please explain)			
Ī	Reason(s) for filing (Check proper box)		Office (Fredse explain)			
	New Well	Change in Transporter of:  Oil Dry Gas				
ļ	Recompletion	Oil Dry Gas  Casinghead Gas Condens	ate			
i	Change in Ownership	Cashigheda Gas				
	If change of ownership give name					
	and address of previous owner					
11.	DESCRIPTION OF WELL AND L	EASE	rmatten Kind of Leas	e Lease No.		
	Lease Name	Well No. Pool Name, Including For 129 Basin Dakota				
	San Juan 27-5 Unit	129 Basin Dakou				
	Location L 1550	Feet From The South Line	and 810 Feet From	The West		
	Unit Letter;		_	in Amelha		
	Line of Section 26 Town	ship 27N Range 5	SW , NMPM, R	County		
		DO OF OUR AND MATURAL CAS	s			
111.	Name of Authorized Transporter of Oil	or Condensate		oved copy of this form is to be sent)		
	El Paso Natural Ga	sCompany	Box 990, Farmington,	New Mexico 87401		
	Name of Authorized Transporter of Casi	nghead 3as 🔃 or Dry Gas 🔼	Address (Give address to which appro	Nove Movice 87401		
	El Paso Natural Ga		Box 990, Farmington Is gas actually connected?	nen		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.  L 26 27N 5W	is que detucity comments			
	give location of tanks.		give commingling order number:			
T3/	If this production is commingled with			Plug Back   Same Res'v. Diff. Res'v.		
1 .	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.		
	Designate Type of Completion	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded 5-7-71	5-28-71	7798	7764		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top & Gas Pay	Tubing Depth 7726*		
	65 <b>33'</b> GL	Dakota	7474'	Depth Casing Shoe		
	Perforations 7474_86' 7510-26'	, 7600-16', 7649-57', 768	30-88', 772 <b>4-32</b> '	7798'		
	7474-80 ; 7010 10	TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	13 3/4"	9 5/8"	237'	190 Sks.		
	8 3/4"	7''	3630'	130 Sks.		
	6 1/4"	4 1/2"	7798*	330 Sks.		
		1 1/2"	7726'	Tubing		
V	V. 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)					
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	life, eve. OFI		
	Ballet i institution of the		Casing Pressure	ghoke Size		
	Length of Test	Tubing Pressure	Casing Pressure			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MUN 2 1 1971		
	Actual Prod. During 1991			DIL COM COM		
				Enant, 3		
	GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test 3 Hours	Bala. Condensoro, immer			
	3756 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	Calculated A. O. F		2569			
<b>3</b> .71	. CERTIFICATE OF COMPLIAN		OIL CONSER	VATION COMMISSION JUN 2 1 1971		
V			APPROVED			
	I hereby certify that the rules and	regulations of the Oil Conservation	Original Signed hi	A R Kendrick		
	I hereby certify that the rules and regulations of the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		By Original Signed by A. R. Kendrick			
		TITLE PETROLEUM ENGINEER DIST. NO. 3				
		This form is to be filed in compliance with RULE 1104.				
	Original Signed F. H. WOOD  (Signature)  Petroleum Engineer  (Title)  June 17, 1971		If this is a request for al	If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation well, this form must be accordance with RULE 111.		
			well, this form must be accou			
			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,  Fill out only Sections I, II, III, and VI for changes of condition.			
			Separate Forms C-104 must be filed for each poor in manager,			
	(υ	ate)	Separate Forms C-104 m	nust be filed for each poor in manage,		