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. DISTRIBUTION					
SANTA FE					
FILE		1	-		
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL				
TARRETORIER	GAS	1			
OPERATOR		,			
PROPATION OFFICE					

F	SANTA FE		NSERVATION COMMISSION OR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110		
	FILE) C		AND	Effective 1-1-65		
-	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GA	S		
-	LAND OFFICE					
	TRANSPORTER GAS /					
t	OPERATOR /					
1.	PRORATION OFFICE					
	Operator El Paso Natural Gas C	Company		•		
-	Address					
ĺ	PO Box 990, Farmingt					
	Reason(s) for filing (Check proper box) Change in Transporter of:					
	New We!1	Oil Dry Gas				
ļ	Change in Ownership	Casinghead Gas Condens	sale			
	If change of ownership give name					
	and address of previous owner					
11	DESCRIPTION OF WELL AND I	LEASE				
·	Lease Name	Well No. Pool Name, Including Fo	Canan / Cadaral	Lease No.		
	Rincon Unit 193 Basin Dakota State (Federa) or Fee SF 080385					
	Location	EO Bart From The Courth	e and 1650 Feet From Th	e West		
	Unit Letter K : 16	DO Feet From The DOUBLE Line				
	Line of Section 35 Tow	mship $27N$ Range 7	W , NMPM,	Rio Arriba county		
	THE STATE OF THE PARTY OF THE P	CED OF OH AND NATURAL GA	S			
III.	Name of Authorized Transporter of Oil	or Condensate X	Address (Give address to which approve	ed copy of this form is to be sent)		
	El Paso Natural Gas Company Name of Authorized Transporter of Casinghedd Gas or Dry Gas X		PO Box 990, Farmington,	NM 87401		
			PO Box 990, Farmington, NM 87401 Address (Give address to which approved copy of this form is to be sent) PO Box 990, Farmington, NM 87401			
	El Paso Natural Gas	Unit Sec. Twp. P.ge.	Is gas actually connected? When			
	If well produces oil or liquids, give location of tanks.	K 35 27N 7W	!			
	If this production is commingled with	th that from any other lease or pool,	give commingling order number:			
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completic		X			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	6-14-72	7-11-72	7558* Top X 11/Gas Pay	7542' Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	7198"	7389'		
	6597'GL	Dakota	/1178	Depth Casing Shoe		
	7198-7210', 7302-14	', 7332-44', 7356-76', 738 ₀	6-92', 7406-12'	7558'		
			CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE	9 5/8"	224*	225 cu. ft.		
	13 3/4" 6 1/4"	4 1/2"	7558"	1142 cu. ft.		
	0 1/ 1	$\frac{1}{2} \frac{3}{8} = \frac{1}{8}$	7389*	tubing		
				i and be soul to be supposed top of lower		
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours)	and must be equal to or exceed top allow-		
	OII. WELL Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)			i, etc.)		
			Casing Pressure	Choke Size		
	Length of Test	Tubing Pressure	Coaing Pressure	Jan San A P D		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MODE 2 1972		
	Action 1 to a to			CON CON		
	1			DIST 3		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	5191	3 hours				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-im) 2391	Choke Size 3/4"		
	Calc. AOF	2272				
VI	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. TITLE TITLE					
			APPROVED			
			Il OLIGINAL prender of	Emery C. Arnold		
			TITLE SUSPENSION SANDERS ST. 43			
M. H. A.		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened				
	Petroleum Engineer (Title) July 24, 1972		well, this form must be accompanied by a tabulation of the 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.			
	· · · (1	Date)	Separate Forms C-104 must	st be filed for each pool in multiply		
			completed wells.			