enter bone.	···		<u>-</u>
DISTRIBUTI	ON		
ANTA FE		1	
FILE		1	
U.S.G.S.		1	
LAND OFFICE			
TRANSPORTER	OIL	7	
	GAS		
OPERATOR		1	
PRORATION OFFICE			

/
Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

	PANSEDERS OIL ONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65 GAS			
3	OPERATOR 1 PRORATION OFFICE Operator El Paso Natural Gas	Company					
	Address						
	P. O. Box 990, Farmin Reason(s) for filing (Check proper						
	New Well	Change in Transporter of:	Other (Please explain)				
	Recompletion  Change in Ownership		/ Gas				
	If change of ownership give name and address of previous owner	e					
11	DESCRIPTION OF WELL AN						
	San Juan 28-7 Unit	San Juan 28-7 Unit 208 Undes. Chacra State (Federal		Lease No.			
	Unit Letter K : 1	1850 Feet From The S	Line and 1850 Feet From	The			
	Line of Section 15	Township 27N Range	7W , <sub>NMPM</sub> , Rio	Arriba County			
ш.	DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL O	GAS				
	El Paso Natural Gas C	Company	P. O. Box 990, Farming	ton, NM 87401			
	Name of Authorized Transporter of El Paso Natural Gas C		Address (Give address to which appro-	Address (Give address to which approved copy of this form is to be sent)			
	If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Eqe.   K   15   27N   7W	P. O. Box 990, Farming				
w	If this production is commingled COMPLETION DATA	with that from any other lease or poo					
••	Designate Type of Comple	tion - (X)	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	02-21-75	08-06-75	4184'	4173'			
	Elevations (DF, RKB, RT, GR, etc., 6651 GL Perforations	, Name of Producing Formation Chacra	Top <b>X</b> :1/Gas Pay 4105	Tubing Depth Tubingless			
	4105', 4106', 4127', 4128', 4129', 4130'			Depth Casing Shoe			
	HOLE SIZE	TUBING, CASING, AI	ND CEMENTING RECORD				
	12 1/4"	8 5/8''	131'	SACKS CEMENT 118 cu. ft.			
	7 7/8 and 6 3/4"	2 7/8" Tubingless	4184'	812 cu. ft.			
l	TEST DATA AND REQUEST	FOR ALLOWARY E. (Test must be					
	OIL WELL Date First New Oil Run To Tanks	able for this c	after recovery of total volume of load oil a depth or be for full 24 hours)				
		Date of Test	Producing Method (Flow, pump, gas lift	, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Choke S			
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-War Con			
	GAS WELL			A COS			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
-	452 Testing Method (pitot, back pr.)	3 hours Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
L	Calc. A.O.F.		1033	3/4''			
	CERTIFICATE OF COMPLIAN			FION COMMISSION AUG 25, 1975			
C	Commission have been complied	regulations of the Oil Conservation with and that the information given he best of my knowledge and belief.	APPROVED 19 19 19 19 19 By Original Signed by A. R. Kendrick				
_		TITLE PETROLSUM ENGINEER DIST. NO. 3					
	· 11 /1 2 .		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,				
_	Drillia Challes Sien	? D					
-	Drilling Clerk						
	August 14, 1975	itle)					
-	(De	ate)	well name or number, or transporter	itt, and vi for changes of owner, or other such change of condition.			