## DISTRIBUTION NEW MEXICO COLLEGAL TAZA FIGHE COMMISSION SANTAFE 1btm C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-) f LE Effective 1-1-65 AND U.S.G.S AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER GAS OPERATOR PRORATION OFFICE Operator El Paso Natural Gas Company P. O. Box 990, Farmington, New Mexico 87401 Reason(s) for filing (Check proper box) Other (Piease explain) New Well Change in Transporter of Recompletion 011 Change in Ownership Casinghead Gas If change of ownership give name and address of previous owner \_\_\_\_ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Mame, Including Largett ar Kind of Lease Jundes Pictured Cliffs Lease No San Juan 27-4 Unit 125 State, (Federal & Fee SF080675 Location Unit Letter\_\_\_ 1550 Feet From The North Line and 1717 Feet From The East Line of Section Township 27-N 4-W Range Rio Arriba , NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Astrono (Greatdress to which approved copy of this form is to be sent) El Paso Natural Gas Company P. O. Box, 990, Farmington, New Mexico Name of Authorized Transporter of Casinghead Gas or Dry Gas X Northwest Pipeline Corporation P. O. Box 90, Farmington, New Mexico 87401 Unit Twp. Rge. If well produces oil or liquids, Sec. 445 arthrily connected? G 8 27-N :4-W If this production is commingled with that from any other lease or pool, give commingling order numbers IV. COMPLETION DATA New We'l Workover Oil Well Gas Well Plua Back Same Restv. Diff. Restv Designate Type of Completion = (X) Χ Χ Date Spudded Total Lapib Date Compl. Ready to Prod. P.B.T.D. 07-21-76 Elevations (DF, RKB, RT, GR, etc.) 12-16-76 6400' 6383 Name of Producing Formation Cop###Gr Firy Tubing Depth 6968¹ GL 3841 Pictured Cliffs 3903' Perforations Depth Casing Shor 3841, 3855, 3859, 3880, 3885, 3890, 3910, 3915, 3920 6400' TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 13 3/4" 9 5/8'' 2231 224 cu. ft. 8 3/4" 711 4184' 253 cu. 415 cu. ft. 1/4" 4 1/2" 1iner 4018-6400' $1 \ 1/4''$ 39031 tubing V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to ar exceed top allow able for this depth or se for full 24 hours) OIL WELL Producing Method (Flow, pump, gas lift, Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pressure Choke Size JAN Actual Prod. During Test Oil-Bbls. Water - Fible. Que MOT **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bble, Condensate/MMCF Gravity of Condensate 1205 3 hours Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size <u>Calc. A.O.F.</u> 1042 <u> 1043</u> 3/4" variable VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION I hereby certify that the rules and regulations of the Oil Conservation APPROVED\_ Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. 1. Bradelek ey\_Original Sin: TITLE SUPERISON This form is to be filed in compliance with RULE 1104. If thir is a request for allowable for a newly drilled or despened (Signature) well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. Drilling Clerk All sections of this form must be filled out completely for allow-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.

(Title)

(Date)

January 4, 1977