	I was at corner			ک۔ا	•	ı
	DISTRIB	ON				
	SANTA FE			17		
	FILE			17		_
	U.S.G.S.		1			
	LAND OFFICE					
	TRANSPORT	= 13	OIL			
			GAS			
	OPERATOR					
I.	PRORATION OFFICE					
	Operator					
		1 P	aso N	Vatu	ral	(
	Address					
	P	.0.	Box	289	. F	a.

	SANTA FE FILE U.S.G.S. LAND OFFICE	REQUEST FOR ALLOWABLE AND AND OFFICE NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65		
I.	TRANSPORT ER OIL GAS OPERATOR PRORATION OFFICE Operator			API	30-039-21661		
	El Paso Natura	al Gas Company					
		Farmington, N.M. 87401					
	Reason(s) for fi ing (Check proper be	Change in Transporter of:	Other (Please	explain)			
	Recompletion Change in Ownership	OII Dry (Gas				
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Mame, Including					
	San Juan 28-7 Unit	236 Basin Dakot	1	and of Lease	Lease No. SF 078835-A		
	Unit Letter H ; 1	550 Feet From The North	ine and 1085	Feet From The Eas	șt .		
	Line of Section 6 To	ownship 27-N Range	7-W , NMPM, I	Rio Arriba	County		
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G					
	Name of Authoriced Transporter of Or El Paso Natural Gas C	ompany	Address (Give address to P.O. Box 289 Fa		·		
	Name of Authors ed Transporter of Co El Paso Natural Gas C		P.O. Box 289, Farmington N.M. 87401 Address (Give address to which approved copy of this form is to be sent)				
	If well produces oil or liquids, give location of anks.	Unit Sec. Twp. Rge. H 6 27-N 7-W	P.O. Box 289 Fa	When	87401		
IV.	If this production is commingled with COMPLETION DATA	ith that from any other lease or pool,					
	Designate Type of Completi		New Well Workover	Deepen Plug Bac	ck Same Res'v. Diff. Res'v.		
	Date Spudded 12-26-78	Date Compl. Ready to Prod. 5-16-79	Total Depth 7175	P.B.T.D 7	159'		
	Elevations (DF, PKB, RT, GR, etc.) 6178 G.I.	Name of Producing Formation Dakota	Top @HI/Gas Pay 6950 *	Tubing D	Depth 124 '		
	7134,7152'	,6968,7035,7042,7073,707	78,7083,7105,7113,	7122, Depth Co	using Shoe		
	HOLE SIZE	TUBING, CASING, AN	D CEMENTING RECORD				
	13 3/4"	9 5/8"	DEPTH SET		224 cf		
	8 3/4"	7"	3006'		188 cf		
	6 1/4"	4 1/2"	7175'		641 cf		
l		1 1/2"	7124'		tubing		
	TEST DATA AND REQUEST FOOIL WELL	of load oil and must be	equal to or exceed top allow-				
ĺ	OH, WELL able for this de		Producing Method (Flow, pump, gas lift, etc.)				
	Length of Test	Tubing Pressure	Casing Pressure	Choke, St	74		
ŀ	Actual Prod. During Test	Oli-Bals.	Water-Bble.	cod - wc	200		
Į.	CAS WELV		1		JUN 20 1979		
	GAS WELL Actual Prod. Tes - MCF/D	Length of Test	Bbls. Condensate/MMCF	Grave	Congatante		
ŀ	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-im)	Casing Pressure (Shut-in) Choke Siz			
ا. VI. (CERTIFICATE OF COMPLIANCE	1 1862 CE	2545 OIL CO	SERVATION CO	OMMISSION		
			APPROVED JUN 20 1370 19				
(hereby certify that the rules and r Commission have been complied w bove is true and complete to the	ith and that the information given					
		-	SUP.	NUMERVISOR DISTRICT IF O			
	1. D. B.	usce	This form is to be filed in compliance with RULE 1104.				
	(Signa		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				
_	Drilling Cle	rk	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.				
	(Titl	· .					
	June 19, 1		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.				

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.

**Constant Color with the filed for each pool in multiply