

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

36-039-21859

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

TYPE OF PRODUCTION	
DISTRIBUTION	
FACTORY	
PIPE	
VEHICLE	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRODUCTION OFFICE	

Operator
El Paso Natural Gas Company

Address
Box 289, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 27-5 Unit	Well No. 51A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. 079393
Location				
Unit Letter <u>I</u> : <u>1530</u> Feet From The <u>South</u> Line and <u>820</u> Feet From The <u>East</u>				
Line of Section <u>5</u> Township <u>27-North</u> Range <u>5-West</u> , NMPM, <u>Rio Arriba</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	Box 289, Farmington, New Mexico 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline	Box 90, Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>I</u> , Sec. <u>5</u> , Twp. <u>27-N</u> , Rge. <u>5-W</u>	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		☒	☒					
Date Spudded 9-11-79	Date Casing Ready to Prod. 5-5-80	Total Depth 6111'	P.B.T.D.					
Elevations (DF, RKB, RT, CR, etc.) 6681'	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 5182'	Tubing Depth 6005'					
Perforations 5182, 5198, 5225, 5242, 5248, 5262, 5269, 5277, 5298, 5306, 5314, 5323, 5382, 5388, 5400, 5407, 5414, 5596, 5620, 5627, 5645, 5719, 5726, 5737, 5741, 5766, 5772, 5789, 5793, 5805, 5812, 5824, 5830, 5866, 5876, 5929, 5958, 6008, 6040, 6050'		Depth Casing Shoe 6111'						
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	224'	224 cf.					
8 3/4"	7"	3849'	235 cf.					
6 1/4"	4 1/2" Liner	3693-6111'	424 cf.					
	2 3/8"	6005'						

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
3722	3 hours		
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Calc. A.O.F.		739	3/4 variable

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

D. G. Suarez
(Signature)
Drilling Clerk
(Title)
May 9, 1980
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 13 1980, 19
Original Signed by FRANK I. CHAVEZ
BY SUPERVISOR DISTRICT # 3
TITLE _____

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, well name or number, or transporter, or other such change of condition.
Separate Form C-104 must be filed for each pool in multiple completion wells.