

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NAME OF WELL	
LOCATION	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

El Paso Natural Gas Company

Address

P. O. Box 289, Farmington, NM 87401

Reason(s) for filing (check proper box)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐ Recompletion ☐ Casinghead Gas ☐ Condensate ☐ Change in Ownership ☐

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
San Juan 27-5 Unit	59M	Blanco Mesa Verde	State/Federal/Lease SF	079393

Location

Unit Letter I : 1640 Feet From The South Line and 805 Feet From The East

Line of Section 6 Township 27-North Range 5-West, NMPM, Rio Arriba 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	P.O. Box 289, Farmington, NM 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 Corp.	P.O. Box 90, Farmington, NM 87401

Well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	I	6	27-N	5-W		

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'tv.	Diff. Res'tv.
		X	X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
11-10-80	8-13-81	7784'	7775'

Devotions (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6541' GL	Mesa Verde	5018'	5905'

5517, 5541, 5545, 5554, 5565, 5569, 5585, 5590, 5594, 5605, 5621, 5625, 5629, 5633, 5650, 5656, 5681, 5728, 5771, 5818, 5836, 5846, 5849, 5947' 5018, 5024, 5038, 5042, 5091, 5095, 5126, 5131, 5161, 5166, 5468, 5474' W/1 SPZ.	Depth Casing Shoe
	7784'

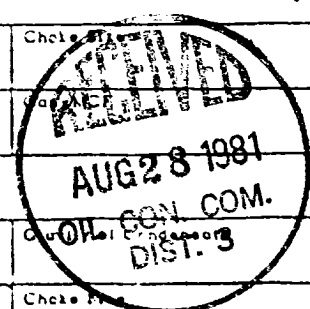
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	237'	325 cf.
12 1/4"	9 5/8"	3715'	620 cf.
8 3/4"	7"	3562-6118'	660 cf.
6 1/4"	4 1/2" 1 1/2"	6016-7784' 5905'	312 cf.

TEST DATA AND REQUEST FOR ALLOWABLE
NEW 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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Choke

AS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Choke
4237			
Testing Method (Flow, back prod.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke
Calc. A.O.F.	767	741	



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.

A. G. Lucas
(Signature)
Drilling Clerk
(Title)
Aug. 24, 1981
(Date)

OIL CONSERVATION DIVISION

NOV 18 1981

APPROVED _____

Original Signed by CHARLES JOHNSON

BY _____

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

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 Forms C-104 must be filed for each pool in multiply completed wells.