STATE OF HEW MEXICO HUNTHALD BY STANFORM ON A STANFORM OIL CONSERVATION DIVISION paramus ion. P. O. HOX 2088 1441475 SANTA FE, NEW MEXICO 87501 F11 F U.S.U.B. TRANSPONTEN GAS REQUEST FOR ALLOWABLE AHD AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PAURATION OFFICE Charator El Paso Natural Gas Company Address P.O. Box 289, Farmington, New Mexico 87401 Peroson(s) for tiling (Check proper box) Other (l'lease explain) [X]Change in Transporter of: New Well Recompletion OIL Dry Gas Condensate Change in Ownership If change of ownership give name and address of previous owner. I. DESCRIPTION OF WELL AND LEASE.

[Well No. | Pool Name, Including Formation] Kind of Lease Legae No. S. Blan Pictured Cliff Ext State, Federal or Fee 03583 22 A San Juan 28-6 Unit Localies 860 Feet From The South Line and 0 Feet From The Unit Letter 27-N 6-W Rio Arriba , NMPM, Range Line of Section Township I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil or Condensate XX P. O. Box 289, Farmington, New Mexico El Paso Natural Gas Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas _____ or Dry Gas XX P. O. Box 289, Farmington, New Mexico El Paso Natural Gas is gas actually connected? Twp. Roe. Sec. If well produces oil or liquids, give location of tanks. 8. If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Plug Bock | Same Hesty, Diff. Resty. New Well Workove! Oil Well Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded 5814' 5833' 7-7-80 4-8-80 Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 3251' Pictured Cliffs 6480' GL Depth Casing Shoe 3128-3136,3152-3177,3175-3191,3220-3226,3240-3246,3250-3256 58331 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 13 3/4" 222 224 cu. ft. 9 5/84 234 cu. ft. 3447 7" 8 3/4" 440 cu. ft 6 1/4" 4 1/2" liner 3278-58331 1 1/4" 3251 TEST DATA AND REQUEST FOR ALLOWABLE where must be after recovery of total volume of load oil and must be equal to or exceed top allowable.

OIL WELL Producing kiethod (Flow, pump, gas lift, etc.) Date First New Oll Run To Tanks Date of Test Casina Pressure Choke Size Tubing Pressure Length of Test Woter - Bhla. Oll-Bble. Actual Prod. During Test

GAS WELL Syavity of Condensate Bble. Condensate/MMCF Actual Prod. Tool-MCF/D Length of Test 3 hours 2361 Choke Size Casing Pressure (Shut-In) Tubing Presews (Shut-in) Yesting Method (pitot, back pr.) 1060 3/4 Variable

CERTIFICATE OF COMPLIANCE

Calc. AOF

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

270

added to the own company
Separa Stadfield (Signalwo)
(Signalwe)
Drilling Clerk
(Tule)
August 1, 1980

(liete)

OIL CONSERVATION DIVISION

APPROVED AUG 1 1 1980 BY Original Signed by FRANK T. CHAVEZ

SIPERVISOR DISTRICT # 3 TITLE _

This form is to be filed in compliance with NULE 1104,

If this is a request for allowable for a newly drilled or despaned well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. H. III, and VI for changes of owner, well name at number, or transporter, or other such thange of condition.

hepsiste forms C-104 must be filed for each pool in multiply considered wells.