

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DATE	
FILE	
U.S.G.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

El Paso Natural Gas Company

Address

Box 289, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well



Change in Transporter of:

Recompletion



Oil



Dry Gas



Change in Ownership



Casinghead Gas



Condensate



Other (Please explain)

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. 35A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. SF 079394
Location Unit Letter <u>F</u> : <u>1560</u> Feet From The <u>North</u> Line and <u>1520</u> Feet From The <u>West</u> Line of Section <u>33</u> Township <u>27N</u> Range <u>5W</u> , NMPM, <u>Rio Arriba</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 289, Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) Box 90, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit <u>F</u>	Sec. <u>33</u>
	Twp. <u>27N</u>	Rge. <u>5W</u>
Is gas actually connected? ☐ When		

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.
		X	X					
Date Spudded 7-23-80	Date Compl. Ready to Prod. 1-13-81		Total Depth 5846			P.B.T.D. 5828		
Elevations (DF, RAB, RT, CR, etc.) 6504' GL	Name of Producing Formation Mesa Verde		To XXX Gas Pay 4872			Tubing Depth 5786		
Perforations 5415, 5420, 5426, 5428, 5478, 5482, 5486, 5490, 5533, 5538, 5568, 5590, 5604, 5635, 5642, 5686, 5692, 5706, 5768, 5785, 5794, 4872, 4879, 4888, 4892, 4896, 4952, 4938, 4955, 4960, 4976, 4981, 4999, 5141, 5148, 5221, 5227, 5272, 5278, 5307, 5313'						Depth Casing Shoe 5846		
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
13 3/4"	9 5/8"		238			224 cu. ft.		
8 3/4"	7"		3506			215 cu. ft.		
6 1/4"	4 1/2"		3414-5846			419 cu. ft.		

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 1080	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Calculated A. OF	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 780	Choke Size 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.



Drilling Clerk

January 26, 1981

OIL CONSERVATION DIVISION

APPROVED

JAN 30 1981

Original Signed by FRANK T. 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 well name of operator, or other changes which may be necessary in a subsequent year.

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