

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APPROPRIATE RECEIVED	
DATE	
FILE	
U.S.D.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

El Paso Natural Gas Company

Address  
P. O. Box 289, Farmington, New Mexico

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Dry Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 27-4 Unit	Well No. 108	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease SF	Lease No. 08067
Location Unit Letter <u>J</u> : <u>1810'</u> Feet From The <u>S</u> Line and <u>1580'</u> Feet From The <u>E</u> Line of Section <u>32</u> Township <u>27-N</u> Range <u>4-W</u> , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 289, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 289, Farmington, New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
J 32 27 4	

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

IV. 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 7-22-80	Date Compl. Ready to Prod. 9-8-80	Total Depth 6421'	P.B.T.D. 6404'					
Elevations (DF, RKB, RT, CR, etc.) 6968' GL	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 5454'	Tubing Depth 6258'					
Perforations 5454, 5469, 5479, 5495, 5500, 5537, 5544, 5577, 5930, 5936, 5949, 5962, 5973, 5987, 5992, 6006, 6011, 6016, 6046, 6054, 6063, 6080, 6152, 6175, 6257, 6247, 6282			Depth Casing Shoe 6421'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	237'	224 cu. ft.					
8 3/4"	7 "	4141'	199 cu. ft.					
6 1/4"	4 1/2"	6421'						
	2 3/8"	6258'						

V. 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)

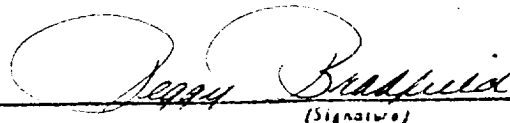
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

GAS WELL

Actual Prod. Test-MCF/D 1190	Length of Test	Bbls. Condensate/MMCF	Clarity of Condensate
Testing Method (prior, back pr.) Calc. A, O, F.	Tubing Pressure (shut-in) 540	Casing Pressure (shut-in) 1188	Choke Size 3

VI. 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.

  
(Signature)

Drilling Clerk

(Title)

9-22-80

(Date)

OIL CONSERVATION DIVISION

SEP 25 1980

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT

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.