## PO DE COPICO RECCEIVEO DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER DIL GAS

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

1.	D.S.G.S.  LAND OFFICE  TRANSPORTER OIL REQUEST FOR ALLOWABLE AND  OPERATOR AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  PROBATION OFFICE  Operator  El Paso Natural Gas Company  Address  PO Box 4289, Farmington, NM 87499					
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	Reason(s) for filing (Check proper b	Other (Please explain)				
	Recompletion Change in Ownership	as ensate				
	If change of ownership give name and address of previous owner	•				
II.	DESCRIPTION OF WELL AND LEASE  Legae Name  Well No   Rool Name Including Formation					
	San Juan 27-5 Unit	96E Pool Name, Including Blanco Mesa V		Kind of Leas State, Federa	, Legge No.	
	Location H 16 Unit Letter;	North Feet From The	1035	Feet From '	East	
	15 27N 5W Rio Arriba Line of Section Township Range , NMPM,					
ın.	DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL O	GAS			
	Name of Authorized Transporter of C El Paso Natural Gas (	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499				
		me of Authorized Transporter of Casinghead Gas or Dry Gas Northwest Pipeline Corp.		Address (Give address to which approved copy of this form is to be sent) PO Box 90, Farmington, NM 87401		
	If well produces oil or liquids, Unit Sec. Twp. Rge. give location of tanks.		Is gas actually connected? When			
īV.	If this production is commingled with that from any other lease or pool, give commingling order number:  COMPLETION DATA					
	Designate Type of Complet	ion - (X)   Oil Well   Gas Well   X	New Well Workover	Deepen	Plug Back   Same Restv. Diff. Restv	
	Date Spudded 9-18-82	Date Compl. Ready to Prod. 11-22-82	Total Depth 7934'		P.B.T.B.7925'	
	Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation 6688 GL Mesa Verde		Top Ott/Gas Pay 5176'		Tubing Depth 6075	
57 58	18,5714,5725,5730,5734,5744,5760,5774,5780,5786,588,5844,5851,5892,5948,6006,6040,6053,6072 w/l sp					
ŀ	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEMENT	
	17 1/2"	13 3/8"	222'		83 cu.ft.	
1	12 1/4" 8 3/4"	9 5/8" 7" liner	3824' 3691-6270'		623 cu.ft.	
-	6 1/4"	4 1/2"liner 1 1/2" tubing	6152-7933'		297 cu.ft.	
V. 1	FEST DATA AND REQUEST FOR ALLOWABLE (Test must be a		6075  Ifter recovery of total volume of load oil and must be equal to or exceed top allowed the for full 24 hours			
Ī	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow,		, etc.)	
-	Length of Test	Tubing Pressure	Casing Pressure		Choke Size	
-	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		Gas • MCF	
<u> </u> _	CAC WELL					
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		Gravity of Condensate	
-	7277	3 hours	0	-		
	Testing Method (pitot, back pr.) Calc. AOF	Tubing Pressure (Shut-in) 1070	Casing Pressure (Shut-	in)	Choke Size 3/4"	
VI. C	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		OIL CO	NSERVATI	ON DIVISION	
I			APPROVED, 19			
	bove is true and complete to the	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 allow able 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.				
	D. G. Busc					
	Drilling Clerk					
_	(Title)					
_	December 2, 1982 (Date)					