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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR
Operator: El Paso Natural Gas Company
Address: Post Office Box 4289, Farmington, NM 87499

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:

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 27-4 Unit	Well No. 145	Pool Name, Including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. 080674
Location Unit Letter K : 1740 Feet From The South Line and 1660 Feet From The West Line of Section 21 Township 27N Range 4W , 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"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Co.	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, give location of tanks.	Unit K Sec. 21 Twp. 27N Rge. 4W Is gas actually connected? When

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 7-17-82	Date Compl. Ready to Prod. 9-27-82	Total Depth 6286'	P.B.T.D. 6265'					
Elevations (DF, RKB, RT, GR, etc.) 6800' GL	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 5392'	Tubing Depth 6162'					
Perforations 5946', 5953', 5958', 6000', 6064', 6080', 6103', 6108', 6166' w/1 spz, 5392', 5396'		Depth Casing Shoe 5428', 5439', 5445', 5452', 5472', 5488', 5501', 5580', 5585', 5590', 5596', 5646', 5755', 6286'						

HOLE SIZE		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"		9 5/8"	203'	130 cu.ft.
8 3/4"		7"	4068'	323 cu.ft.
6 1/4"		4 1/2"	3902-6283'	375 cu.ft.

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	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test shut in 7 days	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) 595	Casing Pressure (Shut-in) 1152	Choke Size

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)
October 19, 1982
(Date)

OIL CONSERVATION DIVISION
OCT 21 1982
APPROVED _____, 19____
BY _____
TITLE _____ SUPERVISOR DISTRICT # 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