

NEW MEXICO OIL CONSERVATION COMMISSION
PACKER SETTING REPORT

I, J. D. Falconi, being of lawful age and having full
Name of party making report

knowledge of the facts hereinbelow set out do state:

That I am employed by Meridian Oil Production Inc. in the capacity of
Petroleum Engineer, that on October 27, 1985

I personally supervised the setting of a Model G-22
Make & type of packer

in El Paso Natural Gas Company, San Juan 27-5 Unit,
Operator of well Lease name

Well no. 69M located in the Blanco MV/Basin DK field,

Rio Arriba county, state of New Mexico, at a subsurface depth of

5959' feet, said depth measurement having been furnished me by

Pipe Record;

That the purpose of setting this packer was to effect a seal in the annular space between two strings of pipe where the packer was set so as to prevent the commingling, in the bore of this well, of fluids produced from a stratum below the packer with fluids produced from a stratum above the packer; that this packer was properly set and that it did, when set, effectively and absolutely seal off the annular space between the two strings of pipe where it was set in such manner as that it prevented any movement of fluids across the packer.

J D Falconi
(Signature)
Petroleum Engineer
(Title)
11-27-85
(Date)

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DIST. 3

I-7-27-5

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

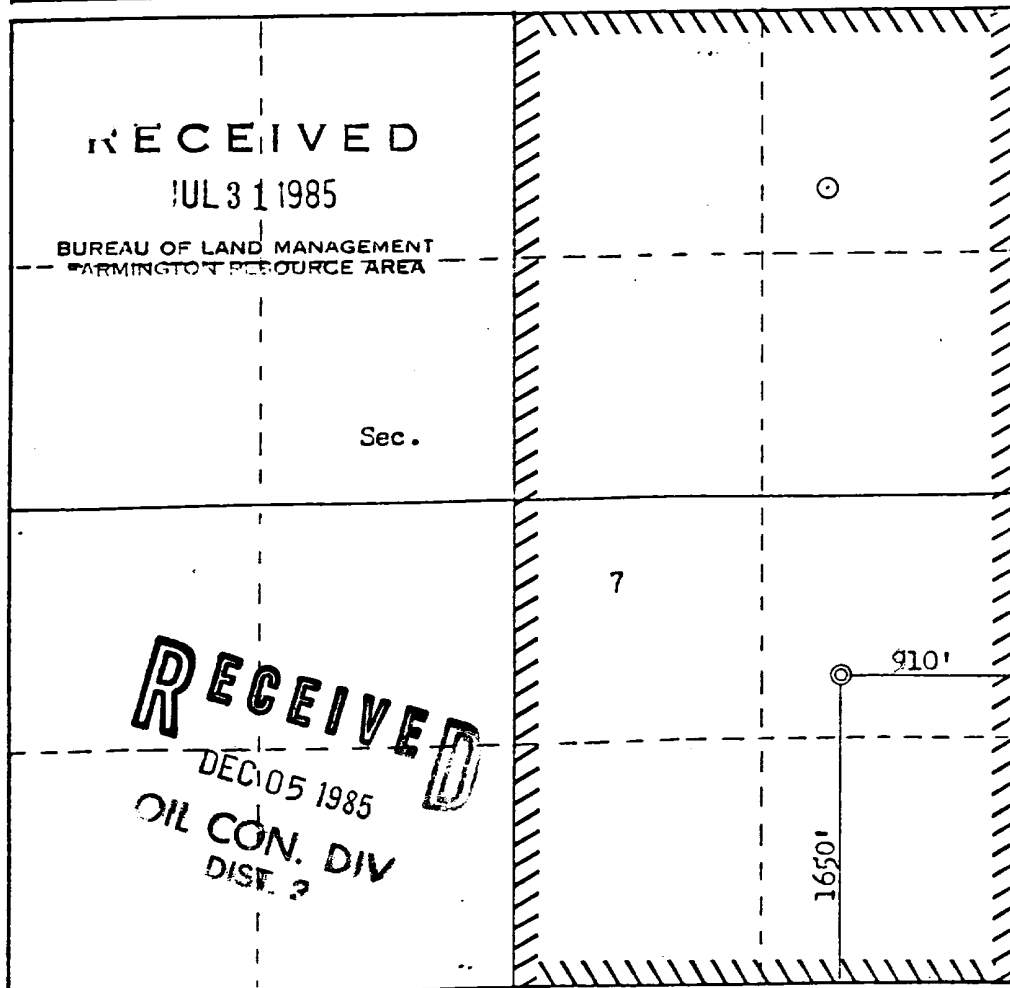
Operator EL PASO NATURAL GAS COMPANY			Lease SAN JUAN 27-5 UNIT (SF 079391)		Well No. 69M
Unit Letter I	Section 7	Township 27N	Range 5W	County Rio Arriba	
Actual Footage Location of Well: <div style="display: flex; justify-content: space-between;"> 1650 feet from the South line and 910 feet from the East line </div>					
Ground Level Elev: 6610	Producing Formation Mesa Verde /Dakota		Pool Blanco /Basin		Dedicated Acreage: 320 & 320 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation Unitization

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission. Note: location changed and name changed to reflect dual well. 7-25-85



Scale: 1"=1000'

CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
Drilling Clerk
Position
El Paso Natural Gas Co.
Company
July 30, 1985
Date

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
May 1, 1985
Registered Professional Engineer
and Land Surveyor
Fred B. Kerr Jr.
Certificate No. 3950

APPLICATION FOR MULTIPLE COMPLETION

El Paso Natural Gas Co.	Rio Arriba	11-27-85
Operator	County	Date
P. O. Box 4289, Farmington, NM	San Juan 27-5 Unit	69M
Address	Lease	Well No.
I	7	27N
Unit	Section	Township
		5W
Location of Well		Range

All Applicants for multiple completion must complete Items 1 and 2 below.

1. The following facts are submitted:	Upper Zone	Intermediate Zone	Lower Zone
a. Name of Pool and Formation	Blanco Mesa Verde		Basin Dakota
b. Top and Bottom of Pay Section (Perforations)	5062-5950'		7589-7802'
c. Type of production (Oil or Gas)	Gas		Gas
d. Method of Production (Flowing or Artificial Lift)	Flowing		Flowing
e. Daily Production <input type="checkbox"/> Actual <input type="checkbox"/> Estimated Oil Bbls. Gas MCF Water Bbls.			

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2. The following must be attached:

- Diagrammatic Sketch of the Multiple Completion, showing all casing strings, including diameters and setting depths, centralizers and/or turbolizers and location thereof, quantities used and top of cement, perforated intervals, tubing strings, including diameters and setting depth, location and type of packers and side door chokes, and such other information as may be pertinent.
- Plat showing the location of all wells on applicant's lease, all offset wells on offset leases, and the names and addresses of operators of all leases offsetting applicant's lease
- Electrical log of the well or other acceptable log with tops and bottoms of producing zones and intervals of perforation indicated thereon. (If such log is not available at the time application is filed it shall be submitted as provided by Rule 112-A.)

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

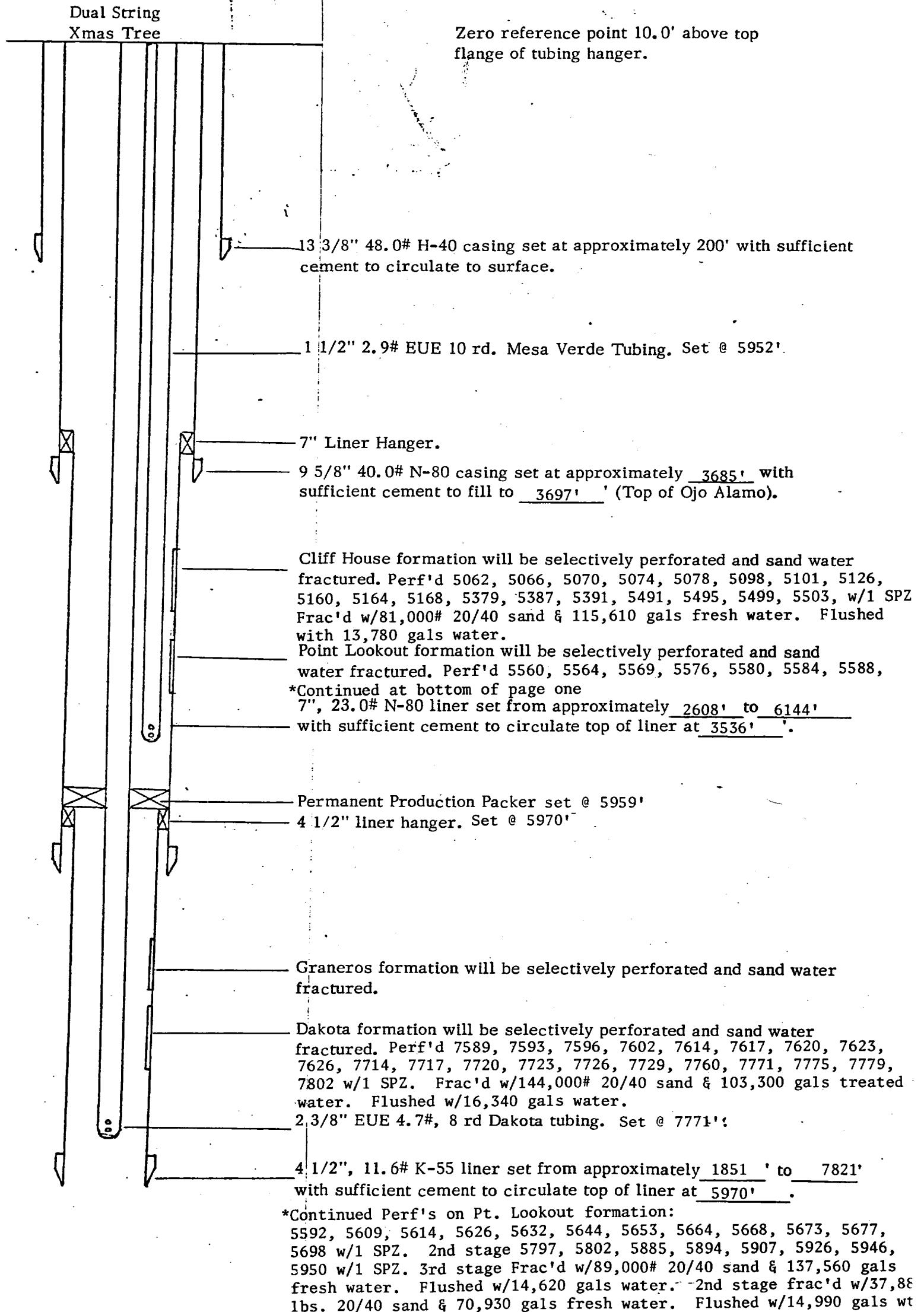
Signed [Signature] Title Drilling Clerk Date 11-27-85

(This space for State Use)

Approved By _____ Title _____ Date _____

NOTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard proration unit in one or more of the producing zones, then separate application for approval of the same should be filed simultaneously with this application.

SCHEMATIC DIAGRAM OF INTENDED DUAL COMPLETION
 El Paso Natural Gas Co., San Juan 27-5 Unit #69M(Blanco MV/BasinDQMD)
 Section SE/Sec. 7, T-27-N, R-5-W



STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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DIST. 3

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
El Paso Natural Gas Company

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recombination	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> 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 27-5 Unit	Well No. 69M	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State (Federal) or Fee	Lease SF 079391
Location Unit Letter <u>I</u> ; <u>1650</u> Feet From The <u>South</u> Line and <u>910</u> Feet From The <u>East</u> Line of Section <u>7</u> Township <u>27N</u> Range <u>5W</u> NMPM, Rio Arriba Co				

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 4289, Farmington, NM 87499
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, Northwest Pipeline Corporation P. O. Box 90, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When <u>I</u> <u>7</u> <u>27N</u> <u>5W</u> <u>No</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.


(Signature)
Drilling Clerk
(Title)
11-26-85
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC - 5 1985
BY Original Signed by FRANK T. CHAVEZ
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 deep well, this form must be accompanied by a tabulation of the dev. tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions.

Separate Forms C-104 must be filed for each pool in multicompleted wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well	Gas well	New well	Workover	Deepen	Plug Back	Same hole v. D.H.L.
			X	X				
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.		Same hole v. D.H.L.	
9-13-85	12-3-85		7835'				7813'	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
6610' GL	Blanco Mesa Verde		5062'		5952'			
Perforations							Depth Casing Shoe	
7589, 7593, 7596, 7602, 7614, 7617, 7620, 7623, 7626, 7714, 7717, 7720,							7821'	
* Continued Perf's Listed Below								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		220'		294 cu ft			
12 1/4"	9 5/8"		3697'		662 cu ft			
8 3/4"	7"		6144'		666 cu ft			
6 1/4"	4 1/2" Liner		5970-7821'		278 cu ft			

V. TEST DATA AND REQUEST FOR ALLOWABLE

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	Bbls. Condensate/MCF	Gravity of Condensate
2119	14 Days	296 MCF/D	0
Testing Method (pump, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size
Rack Pressure	SI 839	SI 961	3/4"

* Continued Perf's:

7723, 7726, 7729, 7760, 7771, 7775, 7779, 7802 w/1 SPZ. 2nd stage 5797, 5802, 5885, 5894, 5907, 5926, 5946, 5950 w/1 SPZ. 3rd stage 5560, 5564, 5569, 5576, 5580, 5584, 5588, 5592, 5609, 5614, 5626, 5632, 5644, 5653, 5664, 5668, 5673, 5677, 5698 w/1 SPZ. 4th stage 5062, 5066, 5070, 5074, 5078, 5098, 5101, 5126, 5160, 5164, 5168, 5379, 5387, 5391, 5491, 5495, 5499, 5503 w/1 SPZ.