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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator El Paso Natural Gas Company	
Address PO Box 990, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Details on back.	

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Huerfano Unit	Well No. 138(OWWO)	Pool Name, Including Formation <del>138(OWWO)</del> 100% Gal. & XZ.	Kind of Lease State, (Federal) or Fee	Lease No. NM 012736
Location				
Unit Letter D	800	Feet From The North	Line and 800	Feet From The West
Line of Section 22	Township 26N	Range 9W	NMPM,	San Juan County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co.	PO Box 990, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co.	PO Box 990, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 22	Twp. 26	Rge. 9	Is gas actually connected? Yes	When 1-9-72

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X			X		X		X
Date Spudded w/o 10-16-71	Date Compl. Ready to Prod. 1-10-72	Total Depth 6685'	P.B.T.D. 6307'					
Elevations (DF, RKB, RT, GR, etc.) 6358'GL	Name of Producing Formation Gallup	Top Oil/Gas Pay 5665'	Tubing Depth 5626'					
Perforations 5665-74', 5746-54', 5778-84', 5829-38'						Depth Casing Shoe 6685'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13 3/4"	9 5/8"	337'	200 sks.					
7 7/8"	4 1/2"	6685'	610 sks.					
	2 3/8"	5626'	tubing					

TEST DATA AND REQUEST FOR ALLOWABLE (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 1-7-72	Date of Test 1-10-72	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 24 hrs.	Tubing Pressure 115	Casing Pressure ----	Choke Size 1"
Actual Prod. During Test 4.0	Oil-Bbls. 4.0	Water-Bbls. 0	Gas-MCF 155

GAS WELL

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

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Original Signed F. H. WOOD

(Signature)

Petroleum Engineer

(Title)

January 13, 1972

(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 14 1972, 19

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #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 completed wells.

Workover:

- 10-18-71 "Mighty Gel" then started sand at 3# per gallon. Sanded off after 9000# of sand.
- 10-19-71 Set RTTS packer at 5584', refraced, pumped prepad on 5000 gallons treated water and 2000 gallons "Mighty Gel", then started sand at 1 1/2#/gallon. Increased sand to 3#/gallon, had pressure increase. Lowered sand to 2#/gallon. Total fluid 16,460 gallons, sand 14,900#. Dropped 3 sets of balls, good ball action. Flushed with 1000 gallons water.
- 10-20-71 Pulled RTTS packer at 5584'. Blowing after frac. Well is making large amount of water and oil.
- 10-22-71 Ran EZ Drill retainer set at 5626'. Landed 179 joints 2 3/8", 4.7#, J-55 tubing in retainer, 5615' set at 5626'. Swabbed, shut in well to build up pressure.
- 1-10-72 Date well was tested.