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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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

I. Operator
El Paso Natural Gas Company
Address
P. O. Box 990, Farmington, New Mexico
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 Huerfanito Unit	Well No. 87(MV)	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, <u>Federal</u> or Fee
Location Unit Letter K ; 1550 Feet From The South Line and 1750 Feet From The West Line or Section 1 , Township 26N Range 9W , NMPM, San Juan 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) Box 990, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, New Mexico
If well produces oil or liquids, give location of tanks. Unit K Sec. 1 Twp. 26N Rge. 9W	Is gas actually connected? <input type="checkbox"/> 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'y.	Diff. Res'y.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 3-31-65	Date Compl. Ready to Prod. 4-22-65	Total Depth 6583	T.D. c.o. 6515					
Pool Blanco Mesa Verde	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 4240	Tubing Depth 4238					
Perforations 4240-56, 4266-74			Depth Casing Shoe 6583					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
15"	9 5/8"	306		250 sks				
7 7/8"	7"	300						
7 7/8"	5 1/2"	300-6583		1000 sks.				
	1 1/4"	4238		tubing				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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 12,918 MCF/D	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Calculated A.O.F	Tubing Pressure 1147	Casing Pressure 1147	Choke Size 3/4"

VI. 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.

OR'G'NAL SIGNED E.S. OBERLY

(Signature)

Petroleum Engineer

(Title)

8-26-65

(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 20 1965

BY Original Signed 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 Sections I, II, III, and VI only 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.