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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 Box 990, Farmington, New Mexico - 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" 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"/>
See Back for Details	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Filan	Well No. 1	Pool Name, Including Formation So. Blanco P. C.	Kind of Lease State, Federal or Fee FF	Lease No. 078461
Location Unit Letter H ; 1650 Feet From The North Line and 800 Feet From The East Line of Section 5 Township 27N Range 8W , 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 87401
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 87401
If well produces oil or liquids, give location of tanks.	Unit H Sec. 5 Twp. 27N Rge. 8W 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'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	
Date Spudded W/O 11-2-69	Date Compl. Ready to Prod. W/O 12-4-69	Total Depth 2246'	P.B.T.D. 2236'					
Elevations (DF, RKB, RT, GR, etc.) 5945' GL	Name of Producing Formation Pictured Cliffs	Top XX /Gas Pay 2157'	Tubing Depth Tubingless Completion					
Perforations 2157-63', 2174-80', 2190-96'		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
No Record	10 3/4"	132'	96 Sks.					
No Record	7"	2155'	150 Sk.					
6 1/8"	2 7/8"	2246'	100 Sks.					

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 2173	Length of Test 3 Hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Calculated A.O.P.	Tubing Pressure (shut-in)	Casing Pressure (shut-in) 633	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.

Original Signed **F. H. WOOD**

(Signature)

Petroleum Engineer

(Title)

December 10, 1969

(Date)

OIL CONSERVATION COMMISSION

DEC 11 1969

APPROVED _____

BY **Original Signed by Emery C. Arnold**

TITLE **SUPERVISOR DIST. #0**

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.

WORMOVER

11-2-69	Rigged up Dainell Bros. rig #1, pulled 1" tubing, mudded up.
11-3-69	Cleaned out to 2245'. Ran 72 joints 2 7/8", 6.4#, J-55 casing (2236') set at 2246' w/100 sacks of cement.
11-21-69	P.B.T.D. 2236'. Fert. 2157-63', 2174-80', 2190-96' w/4 SHF. Frac w/32,000 gal. at 2246' w/100 sacks of cement.
12-4-69	10/20 sand, 32,970 gal. water, dropped 2 sets of 24 balls, flushed w/630 gal. water. Date well was tested.