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	GAS	1	
OPERATOR		2	
PRORATION OFFICE			

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	DISTRIBUTION	NEW MEXICO OIL (CONSERVATION CONTRO	2101			
	SANTA FE /		CONSERVATION COMMIS	SION	Form C-104 Supersedes Old C-104 and C-11		
	REQUEST FOR ALLOWABLE AND				Effective 1-1-65		
	U.S.G.S.						
	LAND OFFICE						
	TRANSPORTER GAS						
ı.	OPERATOR 7	_					
	Operator El Paso Natural Gas	Commany					
	Address	Counterry					
	Box 990, Farmington,	New Mexico					
	Reason(s) for filing (Check proper box		Other (Please e	xplain)			
	New Well	Change in Transporter of:		,			
	Recompletion	Oil Dry Go	as 🔲				
	Change in Ownership	Casinghead Gas Conde	ensate				
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND						
	Lease Name	Well No. Pool Name, Including F	_	ind of Lease	Lease No.		
	Huerfano Unit	165 Basin D	akota s	ate, Federal or Fee	M 03493		
		Poet From The South	1750	1	7 .		
	Unit Letter ; 99	Feet From The Duwi Lir	ne and1/30	Feet From The	<u> </u>		
	Line of Section 30 To	ownship 26N Range	₩ , NMPM,	San Ju a n	County		
				V 10000A			
III.		TER OF OIL AND NATURAL GA		7. ,			
	Name of Authorized Transporter of Oi		Address (Give address to				
	El Paso Natural Gas Name of Authorized Transporter of Co	Box 990, Farmington, New Mexico Address (Give address to which approved copy of this form is to be sent)					
	El Paso Natural Gas				· ·		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Box 990, Farm Is gas actually connected?	When Wew R	/exico		
	give location of tanks.	0 30 26N 9W					
	If this production is commingled w	ith that from any other lease or pool,	give commingling order n	amber:			
IV.	COMPLETION DATA						
	Designate Type of Completi	$\operatorname{con} - (X)$ Gas Well	New Well Workover	Deepen Plug Bo	ack Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.	<u> </u>		
	3-21-67	4-27-67	6 650	1	663 8'		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top 201/Gas Pay	Tubing			
	6553' GL	Dakota	64921		576'		
	Perforations 6492-98, 6550-62, 65	72-8h		Depth (Depth Casing Shoe		
	3000						
	HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD		SACKS CEMENT		
	12 1/4"	8 5/8"	213'	17	O Sks.		
	7 7/8"	4 1/2"	6650'		O Sks.		
		2 3/8"	65761		bing		
			<u> </u>				
V.	TEST DATA AND REQUEST F	'OR ALLOWABLE (Test must be a		of load oil and must	be equal to or exceed top allow-		
	OIL WELL able 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.)						
					ACT IN		
	Length of Test	Tubing Pressure	Casing Pressure Ch		S/2.		
					MULITARIA		
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-W	1 0 195/		
			1		OIL CON. COM.		
	GAS WELL			•	OIL CON. 3		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MOF	Gravity	of Conde media 7		
	4180	3 Hrs.	27 - 3 hrs Casing Pressure (Shut-in				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	1	Choke	Į.		
.	Calculated A.O.F.	1989	1965		3/4"		
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CO	NSERVATION	COMMISSION		
			OIL CONSERVATION COMMISSION APPROVED, 19				
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.							
			priginal Signed by Emery C Arnold				
			TITLE SUPERVISOR DIST. 42				
	(Sign	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 allow-					
	Petroleum Engineer						
	May 5, 1967	able on new and recompleted wells.					

(Date)

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.