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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)
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 Huerfano Unit	Well No. 191	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Fed ☒ or Fee	Lease No. ST 078060
Location Unit Letter E ; 1840 Feet From The North Line and 1090 Feet From The West Line of Section 21 Township 26N Range 9W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ 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 ☐ or Dry Gas ☒ 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 E	Sec. 21	Twp. 26N	Rge. 9W
Is gas actually connected?		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.
		☒	☒					
Date Spudded 6-13-69	Date Compl. Ready to Prod. 7-10-69		Total Depth 6677'		P.B.T.D. 6659'			
Elevations (DF, RKB, RT, GR, etc.) 6397' GL	Name of Producing Formation Dakota		Top XX Gas Pay 6430'		Tubing Depth 6447'			
Perforations 6430-40, 6461-66, 6519-39, 6583-93, 6644-49					Depth Casing Shoe 6677'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		235'		160 Sks.			
7 7/8"	4 1/2"		6677'		600 Sks.			
	2 3/8"		6447'		Tubing			

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 3692	Length of Test 3 Hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Calculated A.O.F.	Tubing Pressure (shut-in) 1811	Casing Pressure (shut-in) 1982	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 By:
L. O. Van Ryan

(Signature)

Petroleum Engineer

(Title)

July 18, 1969

(Date)

OIL CONSERVATION COMMISSION

AUG 5, 1969

APPROVED

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

SUPERVISOR DIST. #3

TITLE

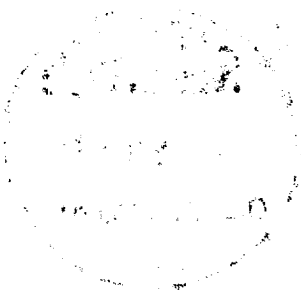
This form is to be filed in compliance with RULE 1104.

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.



APR 19 1964