-	no or 15 feet	. 1 4 6 0	; <b>!</b>	l						
	DISTRIBUTION			NEW MEYICO OU CO						EDVA
	SANTA FE		NEW MEXICO OIL CONSERVA REQUEST FOR ALL							
	FILE /								ND	
	U.S.G.S.			A1	ITHO	DIZAT	TION T	O TD		
	LAND OFFICE				J1110	KILA	1014 1	O IK	71431	OKT
	TRANSPORTER	OIL								
•		GAS								
	OPERATOR	L	<del>  </del>							
	PRORATION OFFICE									
2.	Operator		-				~			
	El Paso Natural Gas Company									
Address										
	P. O. Bo	× 990	New	Mex	ico	874	101			
	Reason(s) for filing									
	New Well	$\square$		Cho	mge in	Transp	orter of:			
	Recompletion			Oil		[		Dry G	as.	
	Change in Ownership	, <u> </u>		Cas	inghea	d Gas		Conde	nsate	
	If change of owners and address of prev									
II. DESCRIPTION OF WELL AND LEASE.    Lease Name   Well No.   Pool Name, Including Form										
	Lease Name		1	i					.1011	
	San Juan		216 Basin Dakota							
	Location			_						
	Unit Letter	<u>H</u>	, 229	0Fe	et Fron	n The_	Nort	h Li	ne and	<u> 98</u>
	Line of Section	8	Tow	nship	27 I	1	Ran	ge	7	W

	DISTRIBUTION  SANTA FE  FILE  U.S.G.S.  LAND OFFICE  TRANSPORTER  OIL  GAS		ONSERVATION COMMISS FOR ALLOWABLE AND INSPORT OIL AND NA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65						
1.	PRORATION OFFICE Operator		·							
	El Paso Natural Gas Company									
	P. O. Box 990, Far Reason(s) for filing (Check proper box) New We!!	Change in Transporter of: Oil Dry Ga	Other (Please ex	plain)						
	Change in Ownership	Casinghead Gas Conden	sate							
	If change of ownership give name and address of previous owner									
II.	DESCRIPTION OF WELL AND I	LEASE   Well No.   Pool Name, Including Fo	ormation K	Lease No.						
	San Juan 28-7 Unit	San Juan 28-7 Unit 216 Basin Dako			SF 078569					
	Unit Letter H; 229	O Feet From The North Line	e and 980	Feet From The	ast					
	Line of Section 8 Tow	mship 27 N Range	7 W , NMPM,	Rio Arrib	a County					
***	DESIGNATION OF TRANSPORT	'ER OF OIL AND NATURAL GA	s							
113.	Name of Authorized Transporter of Oil	or Condensate 😠	Address (Give address to t							
	El Paso Natural Gas Name of Authorized Transporter of Cas		P. O. Box 990, Address (Give address to t	n, New Mexico of this form is to be sent)						
	El Paso Natural Gas	Company	P. O. Box 990, Farmington, New Mexico							
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. H 8 27N 7W	Is gas actually connected?	<u> </u>						
	If this production is commingled with COMPLETION DATA	h that from any other lease or pool,	give commingling order n	ımber:						
•••	Designate Type of Completio		New Well Workover	Deepen Plug B						
	Date Spudded 5/11/74	Date Compl. Ready to Prod. 6/12/74	Total Depth 774	8' P.B.T.	7738'					
	5/11//4 Elevations (DF, RKB, RT, GR, etc.) 6726' GL	Name of Producing Formation  Dakota	Top XX /Gas Pay		7722'					
	Perforations 7520, 7594, 7632, 7	662 7698 7724		Depth	Casing Shoe					
	1520, 1574, 1652, 1		CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
	13 3/4"	9 5/8"	224' 3451'		225 cu. ft. 239 cu. ft.					
	8 3/4"	4 1/2"	7748'		674 cu. ft.					
		1 1/2"	7722		Tubing					
V.	TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks	OR ALLOWABLE (Test must be af able for this de	Producing National Producing	ump. Ess. (1)(, T(C.)						
	Dutid Fillet Man Cir Man To Familio		Casing Presure 101	4912						
	Length of Test	Tubing Pressure	Casing Prefeme JOH	M. COL.	211¢					
	Actual Prod. During Test	Oil - Bbls.	Water-Bbls. OIL	ON. CON Choke	CF					
,			-							
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravit	y of Condensate					
	2926	3 hours		Chaha	St.					
	Calc AOF	Tubing Pressure (shut-in) 2502	Casing Pressure (Shut-is 2504		3/4''					
VI.	CERTIFICATE OF COMPLIANC	E	OIL CONSERVATION COMMISSION							
	I hereby certify that the rules and re Commission have been complied w	ith and that the information given	Original Signed by Emery C. Arnold							
	above is true and complete to the	beat of my knowledge and better.	01							
	,3 1		TITLE SUPERVISOR DIST. #3  This form is to be filed in compliance with RULE 1104.							
	A. J. Busco		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 filled for each pool in multiply							
		ture)								
	Drilling Clerk (Tite	(e)								
	June 18, 1974	(e)								