no of commences who			5	
007046076	ામ 💮	1		
SANTA FE				
FILE	7	~		
H.S.G.B.	Ī			
LAND OFFICE				
TRANSPORTER	OIL.	1		
	GAS			
OPERATOR		1		
PROBATION OFFICE				

	SANTA PE / / / / / / / / / / / / / / / / / /	REQUEST	CORSCRIVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL GAS		Foun C+104 Supersedes Old C-104 and C-110 Effective 1-1-65			
•	El Paso Natural Gas Company							
	Address							
	PO Box 990, Farmington		Other (Plea	ce explain)				
	New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Go Casinghead Gus Conde	ns 🔲					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND I	LEASE						
	Huerfano Unit	Well No. Pool Name, Including F 234 Angel Peak Ga		Kind of Lease State,(Federal)r Fe	e NM 03017			
		180 Feet From The South Li	ne and 1750	Feet From The	East			
	7	mahip 26N Range	9W , NMP	1.4.	San Juan County			
III.	DESIGNATION OF TRANSPORT	CER OF OIL AND NATURAL GA	Address (Give address	to which approved cos	by of this form is to be sent)			
	El Paso Natural Gas Con	mpany		990, Farmingt				
	Name of Authorized Transporter of Cas El Paso Natural Gas Con	Inghead Gas [or Dry Gas [A mpany		990, Farmingt	oy of this form is to be sent) on, NM 87401			
	If well produces cal or liquids, give location of tanks.	O 7 26N 9W	Is gas actually connec	ted? When				
	If this production is commingled wit	n that from any other lease or pool,	give commingling ord	er number:				
JV.	Designate Type of Completio	n - (X) Gas Well X	New Well Workover	Deepen Plug	Back Same Resty. Diff. Resty.			
	•	Date Compl. Ready to Prod.	Total Depth 6113'	P.B.	T.D. 6097'			
	3-13-73 Elevations (DF, RKE, RT, GR, etc.)	6-15-73 Name of Producing Formation	TopXil/Gas Pay	Tubi	ing Depth			
	6547'GL Perforations 5694-5710', 576	Gallup	5694'		6054'			
	Perforations 5694-5710', 576	58-76', 5794-5802', 5814-	22', 5846-58', 5	5894 - 5906', Dept	h Casing Shoe			
	5936-44', 5954-62', 59	74-82', 6010-18', 6046-62 Tubing, Casing, An	D CEMENTING RECO	RD	6113'			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH		SACKS CEMENT			
	12 1/4"	8 5/8"	232'		182 cu.ft.			
	7 7/8''	4 1/2'' 2 3/8''	6113'		1210 cu.ft. tubing			
¥.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	after recovery of total vo epth or be for full 24 hou	lume of loan art and mu	ist be equal to or exceed top allow-			
	OIL WELL Date First New Cli Run To Tanks	Date of Test	Producing Method (FL					
	Length of Test	Tubing Pressure	Casing Pressure	JUN 27 1973	ko Si o			
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	OIL CON. COM				
	DIST. 3							
	GAS WELL	1	Bbis. Condensate/MM	Gran	rity of Condensate			
	Actual Prod. Test-MCF/D 348	Length of Test 3 hours	32		36.9			
	Testing Method (pitot, back pr.) Calc. AOF	Tubing Pressure (Shat-in) 507	Casing Pressure (Shr	cho	ke Size 3/4"			
Vs.	CERTIFICATE OF COMPLIANCE							
¥1.	JUN 2 7 1973							
	I hereby certify that the rules and r Commission have been complied w	ith and that the information given	Original Signed by Emery C. Arnold SUPERVISOR DIST. #5					
	above is true and complete to the	Dest of my knowledge and belief.						
	1 1 2	•	TITLE					

(Signature)

(Title)

(Date)

Drilling Clerk

June 27, 1973

In it 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.