NO. OF COPIES RECE	4		
DISTRIBUTIO			
FILE U.S.G.S. LAND OFFICE		/	
		1	
			<u> </u>
IRANSPORTER	OIL	/	<u> </u>
IRANSPORTER	GAS	/	
OPERATOR		1_	<u> </u>
PRORATION OFFICE			<u> </u>

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L	NO. OF COPIES RECEIVED		A TION COMMISSION	Form C-104			
L	DISTRIBUTION		SERVATION COMMISSION OR ALLOWABLE	Supersedes Old C-104 and C-110			
L	SAHTA FE		AND	Effective 1-1-65			
L	FILE						
	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE						
	IRANSPORTER OIL /						
L	GAS /						
	OPERATOR /						
1. [PRORATION OFFICE						
٦	Operator Natural Cas	Company					
l	El Paso Natural Gas	Company					
П	PO Box 990, Farmington, NM 87401						
ı	Dibas (Please explain)						
Π	Reason(s) for filing (Check proper box)	Change in Transporter of:					
- 1	New Meil						
	Recompletion	· H	are T				
1	Change in Ownership	Casinghead Gas Condense					
	formachin give name						
]	f change of ownership give name and address of previous owner						
11.	DESCRIPTION OF WELL AND LI	Well No. Pool Name, Including For	rmation Kind of Lease	Lease No.			
i	Lease Name		Hun Ext. State, (Federal c	rFee SF 0 77935			
	Huerfano Unit	242 Angel Peak Gal	Hup 13Att				
ļ	Location	Canada	1550 San Tana Th	East			
	Unit Letter O 1025 Feet From The South Line and 1550 Feet From The East						
		0/37	10W , NMPM,	San Juan County			
	Line of Section 12 Town	ship 26N Range	TO VY , TAME IM,				
			-				
III.	DESIGNATION OF TRANSPORTI	or Condensate X	Address (Give address to which approve	d copy of this form is to be sen')			
	Transporter of Uli	U1 COac	PO Box 990, Farmington	, NM 8/401			
	El Paso Natural Gas	3 Company	Address (Give address to which approve	d copy of this form is to be sent)			
	Name of Authorized Transporter of Cast	nghead Gas or Dry Gas X	PO Box 990, Fam ington				
	El Paso Natural Gas	s Company	Is gas actually connected? When	11111			
		Unit Sec. Twp. Pige.	is gas detadify commercial				
	give location of tanks.	O 12 26N 10W					
	If this production is commingled with	that from any other lease or pool,	give commingling order number:				
TT/	COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
1 V .		Oil Well Gas Well	New Well				
	Designate Type of Completion	n - (X) X	<u> </u>	P.B.T.D.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	6110'			
		7-3-73	6128'	Tubing Depth			
	Elevations (DF, RKB, RT, GR, etc.)	7-3-73 Name of Producing Formation	Top Oil/Gas Pay	6057'			
			5682'	Depth Casing Shoe			
	Perforations 5682-94', 5736	5-38', 5788-98', 5818-30',	, 5908=10 , 5950=50 ,	6128'			
	1 5060 721 5086-081 6014-201, DUDN=70						
	TUBING, CASING, AND CEMENTING REGIONS						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET				
	12 1/4"	8 5/8"	231'	225 cu. ft.			
	7 7/8"	4 1/2"	6128'	tubing			
	1 1/0	4 1/2" 2 3/8"	6057'	tubing			
				j			
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to allowable for this depth or be for full 24 hours) OIL WELL Producing Method (Flow, pump, gas lift, etc.)							
V	. TEST DATA AND REQUEST FO	able for this de	Producing Method (Flow, pump, gas lif	1, 4(5.)			
OII. WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)							
	Date : 11-11			Choke Size			
	Length of Test	Tubing Pressure	Casing Pressure	JUL 20 1973			
	Longin			1 1105			
	Actual Prod. During Test	Oil-Bble.	Water-Bbis.	OIL CON COM			
	1	•		UIST. 3			
CAO WEST			2000	Gravity of Condensate			
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	29.6			
	245	3 hrs.	22	Choke Size			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	3/4"			
	Calc. AOF	1026	1028				
	Carc. No.		OIL CONSERVA	ATION COMMISSION			
V	I. CERTIFICATE OF COMPLIAN	, 0 = -	.111 2 0 197	JUL 2 0 1973, 19			
I hereby certify that the rules and regulations of the Oil Conservation			APPROVED	BY Original Signed by A. R. Kendrick			
			Original Signed by				
	Commission have been complied with and that the information above is true and complete to the best of my knowledge and belief.		PEROLEUM ENGINEER DIST. NO. 3				
	Shows to ride and acres.		TITLE	TITLE			
			siled in	compliance with RULE 1104.			
	i li l	•					
	M. G. Bu	201	If this is a request for allo	wable for a newly difficult to a series of the deviation of the deviation ordence with RULE 111.			
	(Sign	nature)	well, this form must be accomp tests taken on the well in acco	ordence with RULE 111.			
	Drilling Clerk		I Att annuous of this form	rast pe inted our combinions			
Drilling Clerk		able on new and recompleted	verse.				

(Title)

(Date)

July 18, 1973

All sections of this form must be filled out completely for silowable 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