HO, OF CODIES RECEIVED		3	
DISTRIBUT			
SANTA FE FILE U.S.G.S.		17	
			<u></u>
		<u> </u>	
LAND OFFICE	LAND OFFICE		<u> </u>
TRANSPORTER	OIL		<u> </u>
	GAS		
OPERATOR			
PRORATION OFFICE		1'	<u> </u>

	DISTRIBUTION SANTA FE		NSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65			
	FILE /		AND				
-	U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GA	3			
-	LAND OFFICE						
	TRANSPORTER GAS /						
	OPERATOR /						
1.	PRORATION OFFICE Operator						
	El Paso Natural Gas Com	pany					
P. O. Box 990, Farmington, NM 87401							
							Reason(s) for filing (Check proper box)
	New We!1	Oil Dry Gas					
	Recompletion  Change in Ownership	Casinghead Gas Condens	sate 🔲				
	If change of ownership give name and address of previous owner  DESCRIPTION OF WELL AND I	Well No. Pool Name, including Fo	ormation Kind of Lease (State,)Federal of	Lease No. E-8441			
	Dow Marks Com	1 Basin Dakota	(distribution)				
	Location	00 5 14	e and 1500 Feet From Th	ne F			
		mship 26N Range	gw , ммрм, <sup>-</sup> San J				
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	S Address (Give address to which approve	ed copy of this form is to be sent)			
	Name of Authorized Transporter of Oil	or Condensate X	Address (Gibe dadress to which approve	1			
	El Paso Natural Gas Com	pany Inghead Gas Or Dry Gas X	P. O. Box 990, Farmingt Address (Give address to which approve	ed copy of this form is to be sent)			
	El Paso Natural Gas Com		P. O. Box 990, Farmingt	1			
		Unit Sec. Twp. P.ge.	Is gas actually connected? When				
	If well produces oil or liquids, give location of tanks.	J 36 26N 9W					
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.			
	Designate Type of Completic	on = (X)	X	1			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	11-17-74	01-08-75	6567' Top OX/Gas Pay	6553 Tubing Depth			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Dakota	6296	6502!			
	6327 GL	Dakota	0230	Depth Casing Shoe			
	6296', 6318', 6396', 64	20', 6472', 6494', 6498'	1	6567			
		TUBING, CASING, AND	D CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	12 1/4"	9 5/8"	226'	189 cu. ft. 1068 cu. ft.			
	7 7/8"	2 3/8"	6567'	Tubing			
v	TEST DATA AND REQUEST FOR ALLOWABLE  (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.)						
•	OIL WELL	Date of Test	Producing Mence Life Dura, to life	t, etc.)			
	Date First New Oil Run To Tanks	Bate of 1881	CELTIVED I				
	Length of Test	Tubing Pressure	Casing Pesting	Choke Size			
		•	1913	Gas • MCF			
	Actual Prod. During Test	Oil-Bbls.	Water-Bals. JAN 20 COM.	gar-me.			
			Water-Bols. JAN & COM.	<u> </u>			
	GAS WELL Actual Prod, Test-MCF/D	Length of Test	Bbls. Condensate/MMCF 3 hours	Gravity of Condensate			
	3882	3 hours	1 25.24	1 59.1 APT			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	Calc. A.O.F.	1287	1984	TION COMMISSION - 107 A			
VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation  APPROVED  APPROVED				JAN 2 0 1974			
				, 19			
				mery (1. Arnold			
Commission have been complied with and that knowledge and belief.				SUPERVISOR DIST. #3			
			11166				
	1 4 2		This form is to be filed in	compliance with RULE 1104. wable for a newly drilled or deepens			

D. D. Bucas	
(Signature)	
Drilling Clerk	
(Title)	
January 13, 1975	

(Date)

If this is a request for silowable 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.