2. DF 601,2.		1	5 ,
DISTRIBUTION			
ANTA FE		1	
FILE		1	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	L	
OPERATOR		1	
PROBATION OFFICE			

	1	
Form C-104 Supersedes Old C-1 Effective 1-1-65	04 and C•110	

	FILE / U.S.G.S.	REQUEST	CONSERVATION COMMISSION T FOR ALLOWABLE AND RANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C- Effective 1-1-65 GAS	
1.	TRANSPORTER OIL GAS OPERATOR PROPATION OFFICE Operator Fl. Paso Natural Gas Co	ompany			
	El Paso Natural Gas Company Address P. O.Box 990, Farmington, NM 87401 Reason(s) for filing (Check proper box)		Other (Please explain)	FEB 13 1976	
	New Well Recompletion Change in Ownership	Change in Transporter of: Cil Dry G		DIST. 3	
	If change of ownership give name and address of previous owner				
11.	DESCRIPTION OF WELL AND	LEASE	Formation Kind of Lea		
	Huerfano Unit	265 Angel Peak	1	Ledse No.	
		OO Feet From The N Li	ne and 1150 Feet From	The W	
	Line of Section 12 To	wmship 26N Range	10W , _{NMPM} , San .	Juan County	
111.	DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oli	TER OF OIL AND NATURAL GA	AS Address (Give address to which appro	oved copy of this form is to be sent)	
El Paso Natural Gas Company P. O.		P. O. Box 990, Farmin	gton, NM 87401		
	F1 Paso Natural Gas Control produces off or Hamiltonia, give location of tanks.		P. O. Box 990, Farmin		
	If this production is commingled wi COMPLETION DATA	th that from any other lease or pool,	give commingling order number:		
	Designate Type of Completic	$\operatorname{On} - (X)$ Oil Well Gas Well X	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded 07-07-75	Date Compi. Ready to Prod. 01-27-76	Total Deeth 13,060*	P.B.T.D. 70201	
	Elevations (DF, RKB, RT, GK, etc., 6657 GL	Name of Producing Formation Gallup	Top M1/Gas Pay 5916	Tubing Depth 6142	
	Perforations 5016! 5027! 5058!	6032! <u>6046!</u> 6096!.611	2', 6182', 6189', 6220'	Depth Casing Shoe	
	HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT	
	17 1/2"	13 3/8"	515'	637 cu. ft.	
	12 1/4"	9 5/8'' 2 3/8''	7095' 6142'	2059 cu. ft. Tbg	
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow	
ĺ	OIL WELL Date Pirst New Oil Hun To Tonks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas ii	124 hours)	
	Length of Test	Tubing Pressure	Casing Pressure Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gae-MCF	
Į		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
[GAS WELL Actual Prod. Test-MCF/D 84	Length of Test 3 hours	Bble. Condensate/XXXXX 3 hrs	Gravity of Condensate 37.2	
Ì	Testing Method (picor, back pr.) Calc. A.O.F.	Tubing Pressure (Shut-in) 479	Casing Pressure (Shut-in) 479	Choke Size 3/4" Variable	
VI.	CERTIFICATE OF COMPLIANC	·	(i	TION COMMISSION	
			APPROVED FEB 1 8 197	5	
(I hereby certify that the rules and re Commission have been complied w above is true and complete to the	ith and that the information given	By Original Mignel by A. Madrick		
	A. D. Succe Signal Drilling Clerk		If this is a request for allow	compliance with RULE 1104.	
_	<u> </u>		well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111. All sections of this form must be filled out complete.		
_	(Till February 11, 1976		able on new and recompleted we Fill out only Sections I. II	ils III, and VI for changes of owner,	
•	(Dat	e)	well name or number, or transporter, or other such change of condition. Senerate Forms C-104 must be filled for each cool in multiply		