

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
FEB 06 1986
OIL CON. DIV.
DIST. 3

I.

Operator
El Paso Natural Gas Company

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☒ New Well	Change in Transporter of:	
☐ Recompletion	☐ Oil	☐ Dry Gas
☐ Change in Ownership	☐ Casinghead Gas	☐ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Huerfano Unit	Well No. 171E	Pool Name, including Formation Basin Dakota	Kind of Lease (State, Federal or Fee)	Lease B-11512-5
Location				
Unit Letter K	: 1550	Feet From The	South	Line and 1850
		Feet From The	West	
Line of Section 36	Township 26N	Range 10W	NMPM.	San Juan
				Cou

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

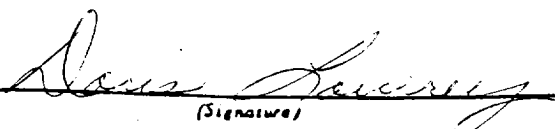
Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit : Sec. : Twp. : Rge. : Is gas actually connected? : When
	K : 36 : 26N : 10W : No :

If this production is commingled with that from any other lease or pool, give commingling order number:

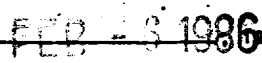
NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)
Drilling Clerk
(Title)
2-3-86
(Date)

OIL CONSERVATION DIVISION

APPROVED  FEB - 3 1986
BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT # 3
TITLE

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of oil well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multi-completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well	Gas well X	New well X	Workover	Deepen	Plug Back	Same Res'v.	Diff.
Date Spudded 1-11-86	Date Compl. Ready to Prod. 2-3-86	Total Depth 6735'			P.B.T.D. 6717'				
Elevations (DF, RKB, RT, CR, etc.) 6706' GL	Name of Producing Formation Basin Dakota		Top Oil/Gas Pay 6611'			Tubing Depth 6694'			
Perforations 6611, 6614, 6635, 6661, 6663, 6665, 6667, 6669, 6675, 6676, 6677, 6678,							Depth Casing Shoe 6734'		
* Continued Perf's listed below									
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"		8 5/8"		213'		189 cu ft			
7 7/8"		4 1/2"		6734'		1815 cu ft			
		2 3/8"		6694'					

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)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test SI 7 Days	Bbls. Condensate/10MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-In) SI 1449	Casing Pressure (Shut-In) SI 1457	Choke Size

* Continued Perf's:

6679, 6680, 6681, 6683, 6684, 6685, 6686, 6687, 6692, 6694, 6696, 6698 w/1 SPZ.