NO. OF COPIES RECEIVED		G	
DISTRIBUTIO	NC		
SANTA FE		1	
FILE		l.i.	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	PANSPORTER OIL /		
TRANSFORTER	GAS	1	
OPERATOR		2	
PRORATION OF	ICE		

1	NO. OF COPIES RECEIVED				
	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C-104	
	SANTA FE /		FOR ALLOWABLE	Supersedes Old C-104 and C-110	
	FILE   j	KE40E31	AND	Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	۸ς	
	LAND OFFICE	ABTHORIZATION TO TRA	THE THE THE TATORAL O	~~	
	TRANSPORTER OIL /				
	GAS /				
	OPERATOR 2				
i.	PRORATION OFFICE				
	Operator	•			
	El Paso Natural Gas (	company			
	Address	Non Monton			
	Box 990, Farmington,		Oshar (01		
	Reason(s) for filing (Check proper box)		Other (Please explain)		
	New Well	Change in Transporter of: Oil Dry Ga			
	Recompletion Change in Ownership	Casinghead Gas Conder	77		
	Change in Ownership	Custingheda Gus Conder	isdie [ ]		
	If change of ownership give name				
	and address of previous owner				
11	DESCRIPTION OF WELL AND	LEASE			
11.	Lease Name	Well No. Pool Name, Including F	ormation Kind of Lease	1 - 1	
	San Juan 28-6 Unit	122 Dakota	State, Fed al	or Fee SF 079192	
	Location		-		
	Unit Letter <b>K</b> 1550	Feet From The <b>South</b> Lin	ne and Feet From T	he West	
	Line of Section 15 Tow	vnship <b>28N</b> Range <b>6W</b>	, NMPM, Rio	Arriba County	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	As Address (Give address to which approv	ed conv of this form is to be sent)	
	Name of Authorized Transporter of Cil  El Paso Natural Gas Co		Box 990, Farmington, N		
	Name of Authorized Transporter of Cas	<del>-</del> •	Address (Give address to which approv		
	El Paso Natural Gas Co		Box 990, Farmington, N		
	BI 1650 MSUITAL GAS CO.	Unit Sec. Twp. Age.	Is gas actually connected? Whe		
	If well produces oil or liquids, give location of tanks.	K 15 28M 6W		Í	
	L	<u> </u>	in a series of the series of t		
	If this production is commingled wit	th that from any other lease or pool,	give comminging order number:		
17.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
	Designate Type of Completion	$\mathbf{x}$	x		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	9-30-66	11-30-66	7948	7930	
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Gil/Gas Pay	Tubing Depth	
	6590' GL	Dakota	7707	7893	
	Perforations	2-		Depth Casing Shoe 79481	
	7707-19, 7803-15, 7877		D OF VENTING DECORD		
			D CEMENTING RECORD	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	<del></del>	
	13 3/4"	9 5/8" 4 1/2"	322' 2948'	200 Sks. 645 Sks.	
	7 7/8" 4	2 3/8"	78931	Tubing	
		2 3/0	1093	1401118	
	THE PART AND PROJECT FOR	OD ALLOWARIE (Tare pure he	the second of total volume of load oil	and must be equal to ar exceed top allow-	
V.	TEST DATA AND REQUEST FOOL WELL	able for this de	epth or be for full 24 hours)		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	t, etc.) Ot TIVED	
				LULIT	
	Length of Test	Tubing Pressure	Casing Pressure	DEC 1 4 1966	
				Gas MCF COM.	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		
			<u> </u>	DIST. 3	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	5934	3 Hours			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Calculated A.O.F.	1865	2611	3/4"	
			<del>                                      </del>	· · · · · · · · · · · · · · · · · · ·	
VI.	CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION COMMISSION  APPROVED DEC 14 1966 , 19		
	Commission have been complied to	with and that the information given	Original Signed by	Emery C. Arnold	
	above is true and complete to the	e best of my knowledge and belief.	BY Stagman Stagman ST		
			TITLE SUPERVISOR DI	ST. #5	
			This form is to be filed in a	compliance with RULE 1104.	
	Original Signed F. H. WOOD		This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepens		
	(Sian	ature)		nied by a tabulation of the deviation	
	Petroleum Engineer		tests taken on the well in accor	dance with RULE 111. at be filled out completely for allow-	

	Original Signed F. H. WOOD
	(Signature)
Petroleum En	gineer
December 12,	1966 (Title)
	(Date)

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.