			_	
NO. OF COPIES RECEIVED			6	
DISTRIBUTION				
SANTA FE				
FILE		1	-	
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS	1		
OPERATOR		2		
PRORATION OFFICE				
Operator				

,
Form C-104 Supersedes Old C-104 and C-110
Effective 1-1-65
\$
Lease No. Fee SF 079522
East
rriba County
copy of this form is to be sent)
copy of this form is to be sent)
w Mexico
Plug Back Same Res'v. Diff. Res'v.
Plug Back Same Res'v. Diff. Res'v.
P.B.T.D. 8099
P.B.T.D. 8099 Fubing Depth
P.B.T.D. 8099 Fubing Depth
P.B.T.D. 8099 Fubing Depth 7778 Depth Casing Shoe 8131 SACKS CEMENT
P.B.T.D. 8099 Fubing Depth 7778 Depth Casing Shoe 8131
P.B.T.D. 8099 Fubing Depth 7778 Depth Casing Shoe 8131 SACKS CEMENT 200
P.B.T.D. 8099 Fubing Depth 7778 Depth Casing Shoe 8131 SACKS CEMENT 200 640 - 3 stages
SACKS CEMENT 200 640 - 3 stages tubing timust be equal to or exceed top allow-
SACKS CEMENT 200 640 - 3 stages tubing Limust be equal to or exceed top allow-
SACKS CEMENT 200 640 - 3 stages tubing timust be equal to or exceed top allow-
SACKS CEMENT 200 640 - 3 stages tubing I must be equal to or exceed top allow- etc.) Choke Sue RILLING Gas-MCF AUG 1 8 1967 OIL CON. COM.
SACKS CEMENT SACKS CEMENT 200 640 - 3 stages tubing I must be equal to or exceed top allow- etc.) Choke Sie-REFIVED Gas-MCF AUG 1 8 1967
SACKS CEMENT 200 640 - 3 stages tubing I must be equal to or exceed top allow- etc.) Choke Sie-RELLIVED Gas-MCF AUG 1 8 1967 OIL CON. COM. DIST. 3

1.	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OPERATOR PRORATION OFFICE	1	CONSERVATION COMM FOR ALLOWABLE AND ANSPORT OIL AND	Supersedes O Effective 1-1-	ld C-104 and C-110 65			
	Operator El Paso Natural Gas	Commeny						
	Address	Vonjondy						
	Box 990, Farmington							
Reason(s) for filing (Check proper box) New We!1 Change in Transporter of:								
	Recompletion	Oil Dry Go	ıs 🗍					
	Change in Ownership	Casinghead Gas Conder	77					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including F	ormation	Kind of Lease	Lease No.			
	San Juan 28-5 Unit	71 Basin Dako			SF 079522			
	Location			<u> </u>				
	Unit LetterB;83	Feet From The North	ne and 1525	Feet From The East				
	Line of Section 34 To	wnship 28-N Range	5-W , NMPN	Rio Arriba	County			
II. _.		TER OF OIL AND NATURAL GA			· · · · · · · · · · · · · · · · · · ·			
	Name of Authorized Transporter of Oil	_	· ·	o which approved copy of this form is	to be sent)			
-	El Paso Natural Gas Com Name of Authorized Transporter of Cas			ington, New Mexico o which approved copy of this form is	to be sent)			
İ	El Paso Natural Gas Con	npany		ington, New Mexico				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. B 34 28N 5W	Is gas actually connect	d? When				
	If this production is commingled wire COMPLETION DATA	th that from any other lease or pool,	give commingling orde	number:				
•	Designate Type of Completic	Oil Well Gas Well	New Well Workover	Deepen Plug Back Same Re	s'v. Diff. Res'v.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	6 -8- 67	7-20-67	8131	8099				
Ì	Elevations (DF, RKB, RT, GR, etc., 6809 GL	Name of Producing Formation Dakota	Top 2000 Gas Pay 7836	Tubing Depth 7778				
	Perforations	DELOCAL	1020	Depth Casing Shoe				
7836-46, 7930-50, 7990-8010,8024-34			· · · · · · · · · · · · · · · · · · ·	8131'				
		TUBING, CASING, AND			MENT			
ŀ	HOLE SIZE	9 5/8"	322'	SACKS CE	MENT -			
ŀ	7 7/8"	4 1/2"	8131'		tages			
ŀ	4 1/2"	2 3/8"	7778	tubing				
	4 V2	23/0						
v . ˈ	TEST DATA AND REQUEST F			ne of load oil and must be equal to or	exceed top allow-			
ī	OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours Producing Method (Flow					
	Date First New On Num 10 1 date	54.6 G. 1551						
}	Length of Test	Tubing Pressure	Casing Pressure	Choke Str. RLU	IVED _			
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF AUG I	8 1967			
ļ				VOIL CO	N. COM.			
	CACWELL				т. з			
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC					
	5048 MCF/D	3 hrs.						
Ì	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	•				
l	Calculated A.O.F.	<u>2666</u>	2658	3/4"				
/1.	CERTIFICATE OF COMPLIAN	CE	ll OIL	CONSERVATION COMMISSIC AUG 18 1967)N			
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED 19 Original Signed by Emery C. Arnold					
	Commission have been complied v	with and that the information given best of my knowledge and belief.						
Original Signed F. H. WOOD (Signature) Petroleum Engineer (Title) August 14, 1967			SUPERVISOR					
			11	•				
				This form is to be filed in compliance with RULE 1104.				
			If this is a request for allowable 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 seems to the such change of condition.	
			•	(Do	ate)	well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply		
						Separate Form completed wells.	. C-104 must be tited for each	all themsalpay