DISTRIBUTION S		ONSERVATION COMMISSION FOR ALLOWABLE AND	/ Form C-104 Supersedes Old C-104 and C- Effective 1-1-65
U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	G AS
PRORATION OFFICE Operator El Paso Natural Gas (Address P. O. Box 990, Farmir Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership	ngton, New Mexico 87401	≍ ∣	
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND I Lease Name San Juan 28-7 Unit	LEASE Well No. Poc. Name, Including Fo		
15	Feet From The South Lin		The East io Arriba County
Name of Authorized Transporter of Cil El Paso Natural Gas Co Name of Authorized Transporter of Cas El Paso Natural Gas Co If well produces oil or liquids, give location of tanks.	or Condensate X Impany Inghead Gas or Dry Gas X Impany Unit Sec. Twp. Rge. J 15 28-N 7-W	P. O. Box 990, Farming Address (Give address to which appropriate P. O. Box 990, Farming P. O. Box 990, Farming Is gas actually connected?	ington, New Mexico 8740
If this production is commingled with COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res
Designate Type of Completio Date Spudded 04-21-77 Elevations (DF, RKB, RT, GR, etc.) 6177' GL	Date Compl. Ready to Prod. 6-30-77 Name of Producing Formation Dakota	X Total Depth 7375 [†] Top 発展/Gas Pay 7154 [†]	P.B.T.D. 7367 * Tubing Depth 7330 *
Perforations	-90, 7272-84, 7302-06, 7	7314-18, 7340-44' CEMENTING RECORD	Depth Casing Shoe 7375
HOLE SIZE 13 3/4" 8 3/4" 6 1/4"	9 5/8" 7" 4 1/2"	222' 3196' 7375'	224 cf. 275 cf 645 cf
TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks	DR ALLOWABLE (Test must be a) able for this de	ter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas li	
Length of Test	Tubing Pressure	Casing Pressure Water-Bbls.	Choke Size
Actual Prod. During Test	Oil-Bbis.	maar-but.	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

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

(Title)

(Date)

S. G.	Bucco	
	(Signature)	

Drilling Clerk

July 12, 1977

Tubing Pressure (Shut-in)

2647

This form is to be filed in compliance with RULE 1104.

Original Signed by A. R. Kendrick

Casing Pressure (Shut-in)

APPROVED.

2662

TITLE TUPERVISOR FIST. 30

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.

OIL CONSERVATION COMMISSION

Choke Size

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. a. Time A 104 miles he filed for seal and la multiply