DISTRIBUTION /

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

FILE	REQUEST	TOR ALLOWABLE AND	Superredes Old C-104 and C-1 Lifective 1-1-65
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
LAND OFFICE	_		
TRANSPORTER GAS		•	API 30-039-21733
OPERATOR			API 30-033-21783
PROPATION OFFICE			
Operator ET DACO MATE	UDAL CAS CO		•
Address	URAL GAS CO.		
BOX 289, FAI	RMINGTON, MEXICO		
Reason(s) for filing (Check proper bo		Other (Please explain)	
New Well X	Change in Transporter of: OII Dry G		
Change in Ownership	H	nsate	
If change of ownership give name			
and address of previous owner	I DAGE		······································
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	ormation Kind of Lea	se Lease No.
SAN JAUN 28-7 UNIT	Γ 257 BASIN DAKOT	State, Foder	al of Fee SF 078497
Location			
Unit Letter B ; 110	00 Feet From The N Li	ne and 14951 Feet From	The E
Line of Section 19 To	ownship 28N Range	7W , NMPM, Rio	Arriba County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS	
Name of Authorized Transporter of Ol		Address (Give address to which appro	oved copy of this form is to be sent)
EL PASO NATURAL GA	AS CO.	BOX 289, FARMINGTON, Address (Give address to which appro	NEW MEXICO
EL PASO NATURAL GA			
If well produces oil or liquids,	Unit Sec. Twp. Ege.	BOX 289, FARMINGTON Is gas actually connected? Wh	NEW MEXICO
give location of tanks.	B 19 28N 7W		
- •	ith that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completi	i_X	X	
Date Spudded	Date Compl. Ready to Frod.	Total Depth	P.B.T.D.
9/18/78 Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	79771 Top @#/Gas Pay	79501
		,	7920'
Perforutions 7725,7732,7738	DK 8,7746,7753,7852,7859,788	6,7895,7906,7911,7924,	Depth Casing Shoe
7943,7953 with 1 S		CENTRAL DECORD	<u> </u>
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT
13 3/4"	9 5/8"	223'	236 cf.
8 3/4"	7''	3750'	272 cf.
6 1/4''	4 1/2" ·	7977'	650 cf.
	1 1/2"	7920'	tubing
TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE (lest must be a able for this de	fter recovery of total volume of load oil opth or be for full 24 hours)	and must be equal to or exceed top allow-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas la	ji, eic.)
	m.V D	Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Cdamy Pressure	Chora shr
Actual Pred. During Test	Oil-Bbis.	Water-Bbis.	Gas - MOF
			TO THE PLANT OF THE PARTY OF TH
			Choke Size OIL DIST.
GAS WELL Actual Prod. Tent-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Concentrate COM
,			DE CON. CO
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size OIL DIST.
	1593	2280	
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	ATICN COMMISSION
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.		APPROVED	
		By Original Signed by A. R. Kendrick	
		COPERTO SOA TOLOGO AS	
0 1. 2		TITLE TITLE	
J. J. Sieces (Signosure)		This form is to be filed in compliance with RULE 1104.	
Signature)		If this is a request for ellowable for * newly drilled or despense well, this form must be accompanied by a tabulation of the deviation	
Drilling Clerk		tests taken on the well in accordance with RULE 111.	
(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
12/8/78		Fitt out only Sections I. Il	I. III, and VI for changes of owner, ten or other such change of condition.
(Date)		well name or number, or transport	ten or other when ensings or committees

Separate Forms C-104 must be filed for each pool in multiply completed wells.