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| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRORATION OFFICE | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65

* CORRECTED COPY

I. Operator
El Paso Natural Gas Co.
Address
Box 289, Farmington, New Mexico 87401
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 San Juan 28-6 Unit | Well No. 47A | Pool Name, including Formation Blanco M.V. | Kind of Lease State Federal State Federal | Lease No. SF079192 |
| Location Unit Letter <u>D</u> : <u>890</u> Feet From The <u>North</u> Line and <u>790</u> Feet From The <u>West</u> Line of Section <u>15</u> Township <u>28-N</u> Range <u>6-W</u> , NMPM, <u>Rio Arriba</u> County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|---|------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> El Paso Natural Gas Co. | Address (Give address to which approved copy of this form is to be sent) Box 289, Farmington, New Mexico 87401 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> * Northwest Pipeline | Address (Give address to which approved copy of this form is to be sent) Box 90, Farmington, New Mexico 87401 | |
| If well produces oil or liquids, give location of tanks. Unit <u>D</u> Sec. <u>15</u> Twp. <u>28-N</u> Rge. <u>6-W</u> | Is gas actually connected? <input type="checkbox"/> | When |

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

V. COMPLETION DATA

| | | | | | | | | |
|--|---------------------------------------|-------------------------------------|-----------------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New well | Workover | Deepen | Plug Back | Same Res't. | Diff. Res't. |
| | | X | X | | | | | |
| Date Spudded 4-30-79 | Date Compl. Ready to Prod. 8-17-79 | Total Depth 6237' | P.B.T.D. 6220' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6702' GL | Name of Producing Formation M.V. | Top GR /Gas Pay 5251' | Tubing Depth 6132' | | | | | |
| Perforations 5251, 5264, 5270, 5336, 5350, 5359, 5364, 5372, 5392, 5491, 5496, 5534, 5546, 5587, 5593, 5602, 5608, 5635, 5644, 5708, 5758, 5762, 5766, 5770, 5774, 5778, 5782, 5785, 5795, 5798, 5822, 5825, 5841, 5846, 5868, 5874, 5888, 5912, 5980, 6024, 6092, 6110, 6121, 6160. | | Depth Casing Shoe 6237' | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 13 3/4" | 9 3/8" | 218' | 224 cf | | | | | |
| 8 3/4" | 7" | 3902' | 330 cf | | | | | |
| 6 1/4" | 4 1/2" liner | 6237' | 427 cf | | | | | |
| | 2 3/8" | 6132' | Tubing | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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 | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) 402 | Casing Pressure (Shut-in) 657 | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

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.

A. G. Buico
(Signature)

Drilling Clerk

(Title)

August 20, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY Original Signed by A. B. Hendrick

SUPERVISOR OF OIL

TITLE

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 name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiple